Ministry of Health
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Healthy Lifestyles
Promotion Program

Action

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Promotion Program

92-05508/

Social Marketing in Health Promotion: A Communications Guide

Action

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Acknowledgements

We would like to thank the many community representatives who contributed to the development of this guide. Also, we would like to thank HindsBrian Associates Limited for their lead role in developing drafts of the guide.

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About this guide

If you are:

- a volunteer or member of a community coalition interested in health promotion,
- a public health professional involved with community issues, or
- an individual trying to prevent drug abuse in your apartment building,

then you will find this social marketing guide useful.

Social Marketing in Health Promotion: A Communications Guide was designed to introduce social marketing and to help individuals and organizations build communications activities to support their community health promotion projects. It shows how to use a variety of communications tools – from issue definition through media conferences – to promote community health messages.

Our goal has been to describe the basics of social marketing in plain language so you could make your social marketing communications strategy more effective. (See Appendix I for a glossary of terms.)

A key feature of this guide is the worksheets included in Appendix II. They are designed to help you as you proceed through the chapters. They are colour coded to correspond to the steps outlined in the Step Check in the left column of this page.

Examples of social marketing/health promotion projects developed by groups across Ontario are included throughout the guide. Appendix III contains a paper on the Addiction Research Foundation's social marketing project, "Promoting the Addiction Research Foundation's Drug and Alcohol Information Line to teens in Sudbury."

Because this guide has been designed to cover the basics, much has been simplified. If you want to launch a more sophisticated social marketing program, this guide provides a foundation. Other books and resources on social marketing can be found in the bibliography.

Additional resources to assist you in your social marketing effort, as well as information on where to go for help, can be found in Appendices IV and V.

In particular, you might want to read:

Fine SH. *The Marketing of Ideas and Social Issues.* Praeger, N.Y., 1981.

Kotler P and Roberto E. *Social Marketing: Strategies for Changing Public Behavior.* The Free Press, A Division of Macmillan, Inc. New York, 1989.

Willet B and Davis B. *Social Marketing As A Strategy For Health Promotion. Ontario Prevention* Clearinghouse, December 21, 1988.

Community Mobilization Manual produced by the Health Promotion Branch, Ministry of Health, as part of the Healthy Lifestyles Promotion Program.

As a final note, this guide was developed to complement and enhance the Community Mobilization Manual that was also produced by the Health Promotion Branch of the Ministry of Health.

What is health promotion?

In Ontario, we use the World Health Organization (WHO) definition of health promotion -

"A process of enabling people to increase control over and improve their health."

Health promotion is a long term strategic process designed to improve the quality of life.

Health promotion is a priority with the government of Ontario. It is a long term strategic process designed to improve the quality of life enjoyed by the people of this province.

While health is an individual matter, health promotion recognizes that there can be certain barriers to good health which are beyond the individual's control – such as adequate housing and income. Health promotion involves three approaches – education, policy, and environmental support (including advocacy, community development, organizational change and social marketing). A comprehensive health promotion strategy involves all of these approaches.

What is social marketing?

Social marketing influences the acceptability of a social idea or cause by a target group.

Social marketing is a series of promotions designed to influence social change. Philip Kotler, a leading American writer on the subject, defined social marketing as "the design, implementation and control of programs designed to influence the acceptability of a social idea or cause by a target group."

Social marketing is not just mass media advertising. It involves: identifying the needs of a specific group of people, supplying information so people can make informed decisions, offering programs or services which meet real needs, then assessing how well the programs/ services met the needs.

Some health promotion professionals have voiced concern over what they see as the "commercial" roots of social marketing. Others argue, however, that social marketing has equally strong roots in social reform campaigns – such as the abolition of slavery, and campaigns to have the government regulate the quality of food and drugs.

Social marketing can be used in many situations. It can be used to give information to the public or to encourage specific target groups (e.g., people with high risk health behaviors or policy makers) to take specific actions.

It can *inform* people about your product, service or message, *persuade* people to support your health issue, and/or *remind* people about an alternative risk-free behavior.

But social marketing also has its limits. Some people refuse to be influenced, no matter how harmful their behavior or attitudes. Perhaps the barriers to health are beyond their control. Maybe the change is too costly. For example, heavy smokers may know that their smoking is harmful. They may suffer from growing public intolerance. Still they feel that the difficulty of giving up cigarettes is too high a price to pay.

Health promotion and social marketing

Social marketing, when combined with other approaches such as healthy public policy and community development, can promote health. It seeks to change social norms and to influence people's attitudes or behavior. In addition, it encourages community participation and the assessment of results. The clearly defined process of social marketing – which matches information, programs and services to needs – can greatly improve the success rate of health promotion programs.

Social marketing and health promotion campaigns involve the process outlined in *Information Processing Theory*. Basically, this theory suggests that there is a series of steps people go through before they change their behavior.

Supply the right information in the right way, at the right time.

- It starts with *awareness*. In the case of AIDS, for example, people had to find out that Acquired Immune Deficiency Syndrome existed.
- The next step is *attitude*. Should people be concerned about the issue? Why? How does it affect them?
- Next, people must form an *intention to change*.
- Finally, people *adopt new behavior* patterns or attitudes.

The goal of social marketing campaigns is to help people change by supplying the right information, in the right way, at the right time. A good anti-smoking campaign, for example, does more than shout "Stop Smoking!" It tells people about the risks of smoking and offers support programs which can help them stop smoking.

The role of communications in social marketing

Social marketing's 5 Ps:

Price

Product

Promotion

Place

Participation

The communications program is the key element in any social marketing strategy. For your communications program to work, you must take a strategic approach. The essential components – identifying people's needs, identifying target groups, defining goals and objectives, identifying the benefits, implementing the program, assessing the results – must be closely related.

For example, one of the objectives of your health promotion project could be to change a policy. Social marketing techniques can be effective if your communications program targets people who make policy and those who influence them.

Philip Kotler coined the phrase "social marketing." Using commercial market practices, he made the consumer (in marketing terms, the target audience) the focus. In developing a social program, he said, you must keep in mind the commercial market's four Ps:

- **Price:** What are you asking consumers to give up in order to get the program's benefits? We're not talking only about money. What will it cost in terms of their habits, beliefs, time?
- **Product:** What are you promoting to consumers? What belief or habit do you want your target audience to buy into?
- **Promotion:** How are you going to communicate to consumers? What benefits are you going to tell them about?

- **Place:** Where and how are you going to reach consumers? Mass media on television? A community program? Or a more intimate method, such as doctors or teachers?

To this, we would add a fifth P:

- **Participation:** How do consumers participate in planning, developing and implementing your program? How do you build a partnership between the individual and your organization?

This model goes right to the heart of what makes up a good social marketing program:

- Work closely with your target audience to thoroughly understand their wants and needs
- Present and stress a benefit.

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The path to social marketing

The following chapters take you through the steps of setting up a social marketing communications program.

The process is given as a series of steps. However, each chapter is also self-contained. If you only need guidance on, let's say, planning a strategy, you can turn to that section directly. You will probably also be doing a number of steps at the same time. Use whatever suits your needs. Try to progress in an order that makes sense to you.

A series of *Worksheets* have been developed to assist you as you proceed through the steps in the process. The worksheets are included in *Appendix II*. The colour bar of the step has been matched with the corresponding worksheets. Feel free to copy them as is or revise them as required.

Step 1. Getting started.

What issue do you want to focus on? Where do you start? What are the facts?

Step 2. Planning and developing your strategy.

What do you want to achieve? Who are you trying to influence? Why should they change their attitudes or behavior? How, when and where will you reach them? How will you know if your program's working?

Step 3. Developing your materials and activities.

What message do you want to promote? How do you communicate your message and promote your activities in the most effective way? How do you work with the media and with sponsors?

Step 4. Writing your communications plan.

How do you put it all together in a straight-forward, logical strategy?

Step 5. Implementing your plan.

How can you help ensure the success of your project?

Step 6. Measuring results.

How do you write an assessment report which can help you and others?

Step One: Getting Started

Step Check

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Getting started

- A. Defining your issue
- B. Assessing your resources
- C. Discovering key details about your issue

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According to an old Chinese proverb, a journey of a thousand miles begins with the first step. This section provides a road map for your communications plan. You will learn about:

- **Defining your issue**
- **Assessing your resources**
- **Discovering key details about your issue**

Note: Corresponding worksheets for Step 1 can be found in Appendix II.

A. Defining your issue

There is no shortage of health issues to tackle. You may have already decided on one. The challenge is to define it so you can approach it effectively.

1. Start by talking with people in your community and writing down the health issues that need action.
2. Beside each issue, write down who it affects and how.
3. Are those affected aware that the issue has an impact on them?
4. Is anyone else interested in the problem? Individuals, groups, politicians? Are the media interested and have they already raised the issue?
5. Identify what activities, if any, have already taken place.
6. Decide if there are any "gaps" which could be filled by a health promotion project.

Once you have answered these questions, you may discover a health issue which the community wants to tackle.

Write down the issue and who it affects in a simple statement. Be as specific as possible. People are far more likely to respond positively to one clearly defined issue (e.g., poor eating habits among school children living in community X).

Organizers of the Wellington-Dufferin Community Alcohol Project used this process. They identified eight target groups most affected by the use of alcohol. One of those target groups – college and university students – then identified four potentially harmful drinking patterns: drinking to intoxication, drinking and driving, high average levels of consumption, and daily drinking.

Organizers set up a separate consultation group with other organizations interested in each of the issues, including people from: the University of Guelph, the Alcohol on Campus Committee (a subcommittee of the Council on Ontario Universities) and Homewood (an addictions treatment and resource centre). The group worked together to develop social marketing programs aimed at helping college and university students change their behavior. (There were also several other parts to the Project to help persuade members of other target groups to adopt healthier drinking practices.)

Other Resources

If you need more help to define your issue, consult the *Community Mobilization Manual* which is available from the:

Health Information Centre
Ontario Ministry of Health
9th Floor, Hepburn Block
80 Grosvenor St.
Toronto, Ont. M7A 1S2
Tel: (416) 327-4327
Fax: (416) 963-3496
Toll-free 1-800-268-1153

B. Assessing your resources

Once you have defined your issue, take an inventory of resources you can devote to health promotion projects and the communications program to support them. For example, Foodshare Metro Toronto launched a Food Action Project to help groups establish community gardens, food co-ops and farmers' markets. The communications program supporting these projects includes a pamphlet, a fact sheet and a newsletter. (See Appendix III.)

Foodshare Metro Toronto, like most community groups, works with few communications resources. The pamphlet and fact sheets are a good way to introduce the group and its projects to agency workers and community members. The newsletter, TAPROOT, is distributed across Metropolitan Toronto. It is an information and outreach tool, and a way for the groups involved in Food Action to communicate with one another. The increase in circulation and the fact that community groups contribute to the newsletter prove that TAPROOT works.

The resources you have – information, people, money, time, public support, media involvement – will help set the scope of your communications program. Your inventory for assessing resources should include the following:

1. What information is available on the issue?
2. What are the gaps in the available information? Is it appropriate? What more needs to be found or developed?
3. How many staff members and/or volunteers are available to work on the project? Be sure to include the number of committees you will need, as well as people who could be recruited from other programs.

4. How much money is available? Include other costly resources you may be able to get free of charge: computer time, mailing costs, in-house printing, copying facilities and education materials.
5. How much time is needed? How long will the communications program run? How much of yours and others' time will be needed – daily, weekly, or monthly – to make it successful?
6. What is the environment like? Hostile or friendly? What community support is there? What legislation is there? Are there approval barriers? Is the time right for your project? Will you face any opposition?
7. What about media involvement? Has there been a lot of coverage? Are there unique local aspects to the issue? Has the local newspaper taken an editorial stand? The media plays an important role in creating awareness, shaping attitudes and calling for action. If you can interest them in your health promotion project, the media can help you.

As a rule of thumb, one-third of your resources should be spent on communications. While this may seem like a lot, remember that people must hear about your project before they decide to take part. The only way for them to hear is through your communications activities. If your social marketing campaign includes radio and television time, newspaper and magazine ads, and billboards, it will probably take more than one-third of your resources.

Decide how much of your resources you want to devote to communications, then make a firm commitment to this amount. The strength of your commitment will help inspire others to support your efforts.

Remember: community health promotion is a long term process. You may wish to save some of your resources for later projects.

C. Discovering key details about your issue

Most of us have strong, personal reactions to health issues. These feelings spur us to action. While we may be guided at first by intuition or common sense, scientific facts and opinions from experts help build community support.

Collect all the information you can on the issue, from your own agency or organization and from other sources. You can never know too much about your subject. Often one fact or detail, presented in the right way, will trigger the response you want from supporters, the media or the people you are trying to reach.

Scientific facts and opinions from experts help build community support.

The more time you spend up-front reviewing books, pamphlets, newspaper and magazine stories, the better prepared you'll be to create your message and materials. When reviewing materials, set aside the items that you might want to use in your program. For some general tips on how to do this, see "Reviewing existing materials" in Step 3 of this guide. Some material is under copyright so, before using it, you will have to get permission from the people who hold the copyright.

In your search, you may discover that other groups are trying to deal with the same issue. Contact them to see what they've learned. What information or advice can they give you? What gaps have they discovered? Would they be interested in working with you? Two heads – and two budgets -- are often better than one.

Need more information? Find out how a broad cross-section of people in your community feel about your issue by conducting a survey.

Checklist of Information

1. Descriptions of the issue

- how many people it affects and/or how often it occurs in your community
- effects on individual, family, community
- causes and/or preventive measures

2. Descriptions of the people affected

- age, sex, ethnicity, income, residence, marital status
- behavior that impacts on problem – causes/prevention any related knowledge, attitudes or behavior
- information on the health problem or the behavior the program is addressing
- any gaps in their knowledge or understanding use of health facilities
- which mass media outlets do they watch/listen to/read?
- influences/sources/people the group will believe

3. Sources of information

This will vary from issue to issue. Here's a checklist of places to look:

- libraries and library search services
- health organizations and services – local hospitals, health units, district health councils, Addiction Research Foundation offices, and federal, provincial and municipal health departments
- universities, schools and teaching hospitals
- issue specific organizations (e.g., National Institute of Nutrition)
- newspapers, microfilm files, magazines, especially professional magazines, such as medical magazines
- community service organizations and local Chambers of Commerce
- corporations with data bases (e.g., major food manufacturers) and trade associations or foundations with data bases (e.g., Canadian Grocery Products Manufacturers Association)
- market research and polling organizations (there may be a charge)
- government agencies (e.g., Statistics Canada)

Community Surveys

There are two main types of community surveys – quantitative and qualitative.

In *quantitative* surveys, a group of 400 or more people who are typical of the population are surveyed by personal interview, phone or mail. The people answer very structured questions. The results of the survey are then projected for the population as a whole. The size of the group surveyed needs to be statistically significant for the survey to be accurate. Three hundred people is usually considered a minimum sample size to ensure that a stable estimate is obtained. National surveys involve 1500 to 2000 or more people.

Quantitative surveys are usually used to discover statistical information. This type of survey can estimate how many people in your community are aware of your issue, and whether they are very concerned, concerned, not very concerned or totally indifferent to the issue. If it is conducted before your campaign begins, this kind of research can provide you with benchmark statistics which can be compared with data drawn from similar surveys conducted after your campaign. This will help assess the effectiveness of your social marketing communications program.

Qualitative surveys involve either a series of one-to-one interviews or discussions with small groups of people (i.e., 6-10 people) called "focus groups." A qualitative survey needs a qualified moderator or interviewer to be successful.

Qualitative surveys are a good way to determine how community members feel about an issue, or how specific groups may react to your message. Focus groups can help you set priorities.

To be accurate, both types of surveys require expertise in both designing the questionnaires and assessing the results. You may want to contact staff of your local university or community college for help in setting up your survey.

If scientific accuracy is not a priority for you, then you may be able to get a general "feel" for a situation from informal surveys. If you have limited time or resources, surveys may not be possible or desirable. Your reaction to information gathered from key informants can be a good guide. Try to ensure that you talk with a wide range of people – not just those who already support your program. This sometimes takes more effort but it is very important for an accurate assessment.

(See Appendix IV for a guide to conducting focus group sessions and a sample quantitative survey questionnaire.)

Give careful thought to the types of people you select for your surveys. You may want to focus on people who belong to your target group (i.e., middle income, single women between the ages of 30 and 45). Or you may want your survey to reflect the community as a whole. In that case, you would have to find out the demographic composition of your community (e.g., male/female ratios, age groupings, education levels, income levels, ethnocultural background) and then select people for your survey who reflect this community profile.

(See Appendix IV for a guide to conducting focus group sessions and a sample quantitative survey questionnaire.)

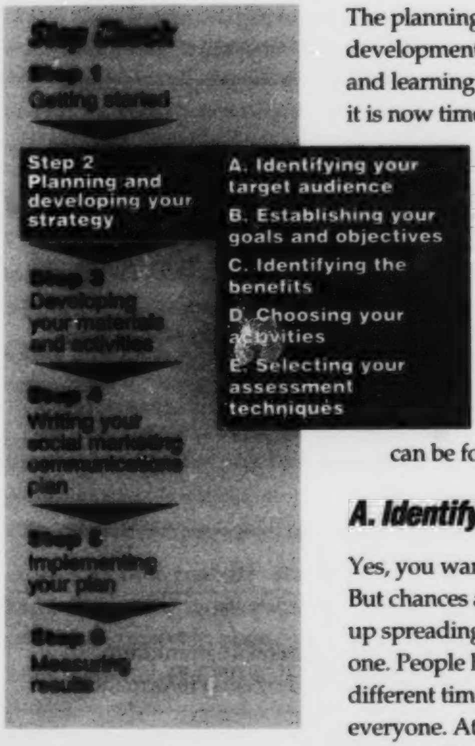
Suggested readings:
Alexrod, MD. *"10 Essentials for Good Qualitative Research,"* Marketing News, March 14, 1975.

Basch, CE. "Focus Group Interview: *An Underutilized Research Technique for Improving Theory and Practice in Health Education,"* Health Education Quarterly, Winter 1987.

Social Planning Council of Metropolitan Toronto. "Community Research Notes: Qualitative Research." Community Research Unit: Winter, 1990. (This series includes: designing a questionnaire, using demographic information, evaluating social programs and defining community research.)

Raeburn, J. "People Projects: *Planning and Evaluation in a New Era."* Health Promotion Winter/1987, pp. 2-4, 13.

Where to go for help:
Both the provincial and federal governments can provide statistical data from health surveys and analyses for specific groups. Contact the Health Promotion Studies Unit, Health Promotion Directorate (Health and Welfare Canada), or the Library, Addiction Research Foundation. (See Appendix V.)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The planning stage provides the foundation for the development of your communications plan. After defining and learning about your issue and assessing your resources, it is now time to consider how you will approach the issue and develop your strategy. In this section, we will cover:

- **Identifying your target audience**
- **Establishing your goals and objectives**
- **Identifying the benefits**
- **Choosing your activities**
- **Selecting your assessment techniques**

Note: Corresponding worksheets for Step 2 can be found in Appendix II.

A. Identifying your target audience

Yes, you want to get your message out to the whole world. But chances are that if you try to reach everyone, you'll end up spreading your resources too thin and convincing no one. People have different interests, needs and concerns at different times in their lives. Very few messages work for everyone. At this stage, the clear identification of your target audience is important and will help later when you write your communications plan.

Primary and Secondary Targets

Focus or "target" your communications program on the people who are most affected by your issue or those who can solve problems. This is your target audience. And the more you know about your audience, the better able you will be to design materials that will reach them.

1. The portion of the population you most want to reach and influence is your *primary* target audience. This is the group that will receive the most attention and for whom the materials will be designed.
2. Your program will be seen by lots of people, so you can also choose one or more *secondary* target audiences or intermediary target audiences. These are people who will find your message meaningful and who can help you reach and influence your primary audience.

Once you identify your target audience, you should then "segment" or divide it into smaller groups which share common characteristics.

Focus on the people most affected by your issue.

The general public is made up of many sub-groups. In order to develop messages and materials and to choose communication tools that will work, you must break the "public" down into small groups with things in common. In thinking about the people you might want to reach and influence, consider their characteristics:

- **Physical:** Sex, age, degree of exposure to health risks, family history and health condition are all important.
- **Behavioral:** Media consumption habits, degree of risky behavior, membership in organizations as well as many other lifestyle factors come into play in trying to change people's attitudes.
- **Demographic:** Occupation, income, education level, marital and family status, ethnic origins, and places of residence and work should all be considered.
- **Attitudinal:** Opinions, beliefs, values and other personality traits all affect how open a person will be to your message.

Segmenting and targeting

Segmenting and targeting are useful tools because they guide you in developing both health promotion and communications activities.

The Sudbury Area Office of the Addiction Research Foundation's Community Programs Department launched a project to promote a toll-free drug information telephone service for adolescents.

Their target was teens. Within that audience, they identified six specific segments, including students who:

- had a drug education homework assignment in health education classes
- were concerned about a friend's drug use
- felt pressured to use drugs
- were using and mixing drugs
- were considering drug experimentation
- simply wanted information.

Radio – which reaches more teens than the other mass media – was the main medium used to promote the telephone service. It was supported by posters and a contest.

Six different radio public service announcements (PSAs) were written, each one targeted to the needs of one of the six audience segments. For example:

- For students with homework assignments, the ad promoted the information line as an easy way to get information quickly.
- For students being pressured by their peers to use drugs, the ad encouraged them to call the line for reasons not to take drugs.

In each case, the needs of the target audience helped set the promotional message. (For more information on this project, see Appendix III.)

Dividing your target audience into segments can make your communications work better. But remember: your project does not exist on its own. It must act with all the other influences on the members of your target audience, such as peer pressures, social environment, workplace policies and others. For your project to work, it must take these other factors into account.

Communications programs should reflect the community.

Linking Different Communities

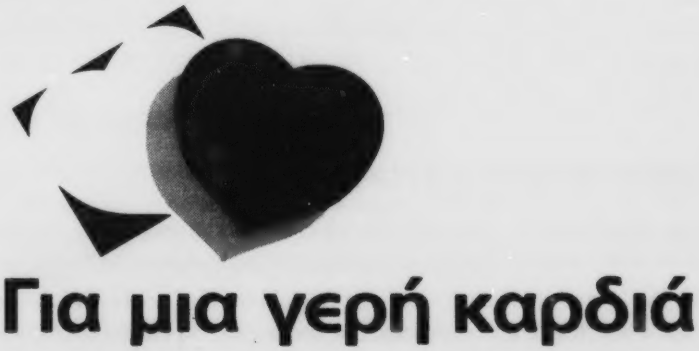
Communications programs should reflect the community they are trying to reach and influence. A community may be geographical or it may be defined by job (e.g., all doctors), heritage (e.g., Southeast Asian) or activity (e.g., snowmobilers).

Many such groups have formed strong communities. Over the years, they have built networks and developed social programs to meet the needs of their members.

Given Ontario's rich multicultural population, your target audience likely includes people from diverse ethnic backgrounds. Some of these people may be difficult to reach. With older people or recent immigrants, for example, language may be a barrier. Or there may be social and cultural barriers.

Work with leaders of the various communities. They may be able to tell you how to reach and influence the target audience in their communities. They may also have a similar health promotion project in place or in the planning stages. You may be able to work together, share some costs and/or plan activities which complement each other.

The organizers of East York's *A Change of Heart* program, for example, worked with members of the Greek community to ensure their program reached Greek-speaking residents of East York. Among other things, they translated their slogan to "Yia Mia Yeri Kardia" which means "For a healthy heart." This slogan was then used on promotional items such as grocery bag stuffers in local supermarkets.



Steps to Success

Your program is most likely to succeed if you follow these guidelines:

1. **Listen and learn.** Most social programs are designed by the mainstream for the mainstream, and they pass by those not in it. To those outside the mainstream, the programs may seem irrelevant, inaccessible and perhaps even harmful. For example, a healthy eating program that failed to list ethnic foods in the Four Food Groups might offend some ethnic groups.

   Learn as much as you can about the groups your program is designed to serve. Work with members of these communities to develop programs and messages which will appeal to target audiences within the community.

2. **Involve members.** Don't just 'target' special groups but work with them. Involve them in your program as much as possible. Recruit them as volunteers and invite them to be members of committees.

   By involving them, you will learn more about the group, the approaches and tools which are likely to work, and barriers in the mainstream program which might affect the group.

3. **Empower people.** Ask the group what they want rather than telling them what they need. Ask how they can help you and if you can help them.

   This approach works because it gets people actively involved in issues related to their health, and because it is not threatening. Often groups outside the mainstream can feel threatened. Their first reaction is to assume they will not be understood. You need to break down that barrier and re-assure them that you are interested and committed to working with them.

4. **Encourage action.** Of course, you will celebrate any success your program has, but you should be particularly supportive of the gains you make with special interest groups. Success breeds success. Reaching a 'hard-to-reach' group for the first time creates a great opportunity. Support and thank the members of the group who work with you. Your gratitude will help reinforce their commitment and energy.

Be realistic. A good goal or objective should be attainable. Nothing kills good intentions and the efforts of good people faster than trying to do the impossible.

B. Establishing your goals and objectives

Your goals and objectives will shape your health promotion project. They are the cornerstones on which you will build your social marketing communications plan.

Goals describe the overall change you wish to bring about (e.g., to improve the health of newborns), while *objectives* are the intermediate, measurable steps you take to reach your goal (e.g., to reach 50% of the pregnant woman in your area with information encouraging them to eat food that is more nutritious).

Objectives should be a clear statement of what your project is going to do. They should be:

1. **Specific.** How long the activities will take? How many people who will be affected? etc.
2. **Reachable** within the limits set.
3. **Measurable.** Then you can assess how well you're doing.
4. **Listed in order of priority.** Then the most urgent aspects get the most attention.

Examples of good objectives could include the following:

- By 1995, the percentage of adults who smoke will be reduced to 20% or lower.
- By 1995, the percentage of youth aged 12 to 18 years of age who smoke will be reduced to 5% or lower.
- By 1995, the proportion of women who smoke during pregnancy will be reduced to 5% or lower.
- By 1992, the percentage of the adult population aware that smoking is one of the major risk factors for heart disease will increase to at least 95%.

Short, Medium and Long Term Goals

Community health promotion takes time. Changing attitudes and behavior is a complex process, so you will need short, medium and long term goals.

- **Short term** goals help keep those involved in the project motivated.
- **Medium term** goals allow you to evaluate and adjust your program over time.
- **Long term** goals recognize that behavior change takes time and resources, both of which must be used as part of a widely-based, co-ordinated strategy for projects to have an impact.

By setting short, medium and long term goals, you also set the direction for your communications program:

- To start some pregnant women thinking about their health.
- To persuade others to adopt a healthier lifestyle.
- To improve the health of mothers and babies.

C. Identifying the benefits

To motivate people, you must convince specific segments of your target audience that they will benefit by using your "product" and/or changing their behavior. You do that by showing how your product, service or message can meet their needs. Clearly identified benefits will be a key component of your communication plan.

For more information or assistance:

Check the *Community Mobilization Manual* available from the Health Information Centre, Ontario Ministry of Health.

Or contact the *Ontario Prevention Clearinghouse* for examples of how other projects have set their goals and objectives.

Contact your local college or university. They may offer courses in communications, marketing or social marketing. If so, the instructors, students and/or library may be of assistance.

(See Appendix V for contact information on the Health Information Centre and the Ontario Prevention Clearinghouse.)

Suggested reading:
Caverson R, Douglas RR, Gliksman L and Chulpka L. "Community Receptivity to a Countermeasure Designed to Reward Sober Drivers." ***Health Promotion International*** **5(2), 119-125, 1990.**

The Addiction Research Foundation (ARF) in Sudbury promoted a drug and alcohol telephone information service to teenagers.

ARF's telephone service was promoted as accurate, confidential and free information on alcohol and other drugs. Although each segment of the target audience had a different reason for wanting the information (some to complete a homework assignment, some to resist peer pressure to use drugs) each target audience did need easy access to confidential information. Therefore the radio PSAs produced by a local radio station for ARF identified a need for calling the telephone information line and promoted the corresponding benefit. (For more information on this project see Appendix III.)

Find one strong benefit to motivate your target audience.

Rating the Benefits

Your health promotion project may have more than one benefit. It is vital that you list the benefits in the order of importance to your target audience. For example, if your project is a stop smoking campaign and your target audience is teens, then personal appearance will likely be a more compelling benefit than longer life. If your target group is expectant mothers, their health and that of their baby may be more important than better looks. If your target group is elderly people, fewer sick days, less restricted activity and better quality of life may be more important than a longer lifespan. If you are unsure which benefits of your product, service or message will appeal most to your different target segments, surveys or focus groups can help you.

With benefits, it pays to be focused. If you can find one strong benefit that will motivate segments of your target audience, it will do more to change their attitude and behavior than listing many other benefits.

Rewards and incentives

Social marketing generally promotes intangible benefits such as the long term results of adopting better health practices. Some people find it difficult to make the effort to unlearn harmful eating/drinking/smoking habits, learn new habits and stick with them. In other words, they have trouble justifying the *price* of adopting the behavior. Price, as you may recall, was the first P in the five Ps model of social marketing.

Some social marketers have found that people respond well to rewards or incentives. They see them as small but important ways to recognize their efforts.

The Homewood Health Centre in Guelph, for example, has launched a Sober Driver Project as part of its Community Alcohol Project. This project is based on a program originated by the Sudbury Regional Police Service and ARF. Cars are stopped at police spot checks. Drivers who have not been drinking are thanked by the police officer and given a brochure and gift with the slogan "No Sweat." In this project, the Homewood Health Centre is working with the Guelph police, the OPP, the Canadian Automobile Association and provincial Ministries of Health and the Attorney General.

D. Choosing your activities

Social marketing includes many different strategies, depending on the objectives. If your objective is to raise awareness, then a media event might be the right approach. If you want to motivate people, a contest may be a useful strategy. A communications program is one of many strategies and, ideally, it would be part of and supported by other social marketing strategies.

When planning your communications program, ask yourself: *which communications activities fit with your resources and will reach your target audiences?* Your answer will be the shopping list of communication activities that could be part of your communications program. The activities you choose will be a key component of your communications plan. These could include:

- designing, producing and distributing a poster or flyer
- obtaining copies of an existing information pamphlet and letting people know that they are available
- writing and distributing a press release
- organizing a media conference
- organizing a publicity event
- writing a public service announcement and delivering it to your local radio and television stations

East York's *A Change of Heart* social marketing program included dozens of communications activities ranging from lapel pins, to appreciation certificates signed by the mayor, to banners and a mascot for events, to an interactive quiz board with true/false questions.

The possibilities are as rich as your imagination ... and your resources. Whether you want to start a local community-based communications program or launch a major mass media campaign, you will have to decide how to best get the message to your target audience.

Communications Media Spectrum

Generally, the media fall into three broad categories:

- people to people communication
- free communication
- paid communication.

All have their strengths and weaknesses. Here are some points to consider about the various methods of communication.

People to people communication

People talking to people is the most important influence in behavior change. Social pressures and peer support and influence can support the change. Look to organizations, community leaders and rule-makers to help get your message across.

Organizations

Take a look at your community. Are there organizations which could help you reach your target audience?

Public health units, voluntary health agencies, service clubs, YMCAs, other health or athletic clubs, community centres, religious organizations and companies deal with a great number of people on a regular basis. They may even have similar goals to yours. They can help with advice, people and perhaps even funds. It is much easier to tie into an existing network than to create your own. Organizations can help supply the support and encouragement individuals need to make a change.

Community leaders

These are people who can influence other people. Doctors, public health nurses, social leaders, political leaders, union leaders, even local sports heroes can all be recruited to help persuade your target audience of the benefits of change. Sometimes their offices can be used to hand out information pamphlets or posters. Or they can be asked to step in, one-to-one with a number of the target audience to convince him/her of the benefits of change.

Rule-makers

These are people – such as teachers, parents, day-care workers and hospital administrators – who actually "control the environment" of other people. Depending on the project, they can be valuable allies. Once persuaded themselves, they can exert a great deal of influence over those in their care.

Free communication

Free communication means you don't have to pay to deliver the message, but that doesn't mean it is without costs. You still have to pay to prepare press kits, posters, handbills and so on. While this route has enormous appeal to small organizations trying to get a message across, it does have the disadvantage of being largely out of your control. Your message might be front page news one day, and not included at all on another day – simply because there were more things happening that day.

Publicity

The first thing to remember when approaching the press is that its job is to inform or entertain its audience, not to educate it. For example, most media coverage on AIDS "informed" readers/viewers that people were dying but failed to "educate" them as to the true nature of the illness. The result bordered on hysteria. On the other hand, the media have played an important role in putting environmental concerns on the political agenda.

News media will generally focus on new information, not the whole picture, and are generally not a reliable way to transmit complex information. Newspapers, radio and television can transmit news quickly to a broad audience, but you cannot expect the media to share your goal of trying to shape attitudes or behavior.

A good publicity campaign can be your most valuable tool in creating awareness of an issue. Interviews on news and call-in shows, live remote broadcasts, and editorials in all media can all help push a program to the front of everyone's consciousness.

If you arrange to do a media interview, take time to prepare yourself. Decide exactly what it is you want to say and, during the interview, try to keep the discussion on track. Remember that what you say will likely be edited down to a few seconds of tape or a few inches of space in the newspaper, so keep your comments focused on the issue.

To make the most of media opportunities, keep the message simple.

Use media to inform. Use other, more controllable communications methods to change attitudes and behavior.

Community media

Many people may not be aware of the opportunities in most communities to inform the public about issues. Posters placed in schools, government offices, in businesses, laundromats, community centres and workplaces can all help inform the public. If you are trying to attract people to an event or meeting, posters can be very effective and cost little to produce and distribute. Again, these tools work best to create awareness, rather than to help people change attitudes.

By government regulation, cable TV stations must provide a community channel. Contact the program director at your local cable television network. Talk to him/her about your community health project and the communications program you are planning. Find out what help they can give you: publicity on existing community programs? technical facilities and personnel to produce your own program?

Keep in mind that other community groups may have festivals, special events or workshops scheduled which appeal to your target audience. Contact the organizers and ask if you could set up an information booth, distribute your flyers or display your posters. Discuss your program with them to see if there are other ways to co-operate.

Paid communication

When you buy your media coverage, you control what is said, where and how (unlike free publicity where you depend on a reporter's or a newspaper's interpretation of your message).

Television advertising

Television advertising is the most persuasive medium. It is also the most expensive. Television stations do run free public service announcements (PSAs), but you have no way of knowing when the message will run or if your target group will see it.

If you have the money to use television, you would be wise to use an advertising agency and/or a television production company. You may know a lot about health, but they know a lot about television. By looking in the Yellow Pages of your telephone directory, you can find the agencies and production companies in your area.

Radio advertising

The big plus of radio is that it is immediate. You can reach your target audience quickly, which makes radio an ideal tool to create awareness. Because most radio stations have their own sound (country, rock, all-news), you can choose the station(s) which is most likely to reach your target group – whether it is teens or mothers. However, buying radio time can be expensive (although less so than television). Sometimes you can save money on production costs by working with the radio station. The station may produce your commercial at little or no cost, using their professional announcers, sound effects and stock music.

Print advertising

Print advertising includes: newspaper ads, magazine ads, bus shelter posters, billboard posters and transit ads. Costs vary depending on the size of the audience and the production required (e.g., the design of the ad, photography). You can reduce costs by using prepared materials. The Ministry of Health, for example, provides free print ads on healthy eating, smoking cessation, and drinking in moderation. The ads have a place where you can insert your local message. Contact your local board of health for more information.

Direct mail

Direct mail is often an effective, inexpensive way to reach people.

Direct mail – which can be either a letter or a small poster – is often an effective, inexpensive way to reach people, especially if your target group lives in a specific area or has something in common (e.g., all doctors). You can buy mailing lists from several companies in the direct mail industry. Mailing lists can also be traded. Get in touch with other groups in your community: perhaps you can work together on mailing lists.

For a cost, Canada Post will deliver a mailing to people living within a geographic area. This is called a "postal walk." Of course, you and your volunteers can draw up your own mailing list and mail the information out yourselves.

Depending on the size of your community, direct mail can also be a good way to gather information. Include a questionnaire or reply card in your mailing to help you learn how many people are interested in your issue or are aware of your activities. You can expect 3% to 5% of people to fill in and return your questionnaire.

Newsletters and mailings by other community groups can also be an effective, relatively low-cost method to inform people about your project. Keep this in mind when you're talking to other groups. Ask them if they do regular mailings and if they would include information about your project.

The promotional mix

For most projects, you will probably want to use more than one method: a poster to inform, a forum or pamphlet to persuade, and some form of interactive communication to actually spark behavior change. You will probably want to use more than one location to convey your message: posters in the workplace and community centre and a meeting at the local library or on the community access cable TV channel. No matter which methods you choose, make sure your message is consistent.

Depending on who you are trying to reach, plan a mix of media, a combination of high visibility/short life and low visibility/long life media. Use the strengths of each medium to build a solid communications program that will convey your message for as long as your project lasts.

Try to use all the communications methods to reach your target audience.

	Long Life	Short Life
High Visibility	Store Display Mass Media	Buttons & Stickers Contest
Low Visibility	School Package	

Having your issue talked about on a television news program raises its profile but – unless there are follow-up stories – the attention is short-lived. A well-written brochure may contain persuasive arguments and it will be useful for months or even years. But if your target audience doesn't receive the brochure, it will have little impact.

For example, if your health issue is AIDS and your project is a series of community information sessions, a mix of media might be best: a videotape, followed by a group discussion, with a pamphlet the participants can take away.

If your objective is to build awareness, a mass media mix could include: TV ads with corresponding radio ads, billboards and transit posters.

Develop a mix of communications tools and employ them in the best way over the course of the project. Together, they should form an integrated strategy of media, promotions, events and one-to-one interactions.

The Ottawa-Carleton Health Department, for example, launched a *Heart Beat* social marketing campaign. Its promotional mix included: mass media, a guide to heart healthy restaurants, grocery store nutrition tours, occupational health programs, resource guides, physician awareness, promotion in recreation department brochures, skills training, contests and special events.

Working with Businesses

Consider working with businesses in your community. Sponsors from the private sector can become valuable partners in helping you develop activities. Some may donate money. However, it is often easier and just as helpful for businesses to donate resources.

The Addiction Research Foundation (ARF), for example, worked with the public relations people at National Video to distribute five of ARF's informational Dr. Cooper videos on alcohol, cannabis, tobacco and solvents free through National Video's 12 outlets in Northeastern Ontario. News releases, radio and TV PSAs, posters, a coloring contest to encourage school classroom involvement and store visits by the puppet character Dr. Cooper were used to promote the videos. In return for exclusive rights, National Video distributed the videos free and shared the promotional costs. During the one year pilot study, the videos were borrowed 4,200 times with a viewing audience of 15,500 children and 9,600 parents.

Here's a partial list of how sponsors can help:

- **Funding.** If you are a registered non-profit organization, businesses may make a charitable donation to your cause. They can provide money in return for having their name identified with your program. Or they may sponsor a specific project, by giving funds for a brochure, seminar, school kit or special event.
- **Promoting your message**. Businesses already use communications to reach various publics. Ask them to distribute your promotion materials or message in their stores at the checkout counter, on bags or in window displays; put your message on or inside their product packages; or donate a portion of newspaper space, radio or television time from their own advertising schedules to promote your message.
- **Providing services or resources.** Ask companies to:
  - Print your materials. Some firms may have small presses to print materials such as flyers, and press releases.
  - Supply graphics or illustrations. Check department stores, small publishers or ad agencies who may have in-house art designers.
  - Donate vehicles, lunches or snacks, sound equipment, meeting rooms and other facilities, or employee volunteers for special events.
  - Donate prizes or incentives.

- **Co-sponsoring events.** Newspapers, radio and television stations have found that being involved with community projects can be good for business. Contact the newspaper or station management. If they support you, they can provide great publicity exposure and help with production costs. This was the route chosen by the Addiction Research Foundation (ARF) in Sudbury to promote its drug and alcohol information telephone line. (See Appendix III for details.)

The Right Fit

There are many reasons why businesses may agree to sponsor your efforts. Some have altruistic motives such as:

- a desire to be a good corporate citizen
- a personal interest in a cause
- a concern about the health of the community which affects their well-being as a business.

Companies may also lend support because it will:

- improve their sales
- enhance the image of their products
- reach potential target groups with a positive message related to their product.

The key to successful sponsorships is to find businesses which fit or share a common goal with your program.

Here are some examples of "good fits":

The Canadian Dietetic Association wants to promote better nutrition habits among the public. So do many food manufacturers. These companies have sponsored television ads, TV specials, contests, nutrition books and educational materials produced by the Association.

The Heart and Stroke Foundation of Ontario wanted to promote awareness among smokers that a plan to quit should be developed in consultation with a doctor. A major manufacturer of a nicotine-based chewing gum, available only by prescription, paid for the development and production of an information poster.

For more information on working with sponsors, see Step 3.

Here's a checklist to use in assessing possible business sponsors:

- What are your target audiences? Which businesses sell products or services to those same groups?
- What are the objectives of the project? Which businesses will benefit from its success?
- Would any of your planned events provide good exposure for a particular sponsor's product, name or message?

Be imaginative. Think up promotion ideas that would be ideal for certain businesses. For example, run a photo contest celebrating physical fitness sponsored by your local camera stores. Or plan a fund-raising car rally sponsored by one of your area car dealers. Or look to a

Where to go for help:

The Community Mobilization Manual, available from the Health Information Centre of the Ministry of Health (Appendix V), can help you estimate the time and money involved in creating community events.

For more information on time and money for media promotions, look through Step 3, "Developing Your Materials and Activities".

For more information, contact an advertising or public relations agency or contact your local college/university and recruit a communications/marketing instructor or some of the students.

local grocer to sponsor nutrition seminars and store tours for older adults and single mothers.

Note: In recent years, many social organizations have established policies and guidelines for sponsorships. Check them out very carefully. Failure to do so may affect future funding.

Tips for Choosing Your Activities:

Your activities should reflect what you're trying to say. The media you use to get your message across depends on three factors:

1. The message itself

In analyzing your message, ask yourself the following questions:

- Am I trying to inform? Persuade? Remind?
- Is the message complex or simple?
- What tone am I trying to establish? Urgency? Concern for others?
- How sensitive is the issue?

If the message is complex, you will need some sort of written material to get all the points across. If it is an emotional issue, a videotape with music and other effects might heighten the impact.

2. The target audience

Your target audience should shape your choice of communication activities. If your audience is children, then choose a medium that children can understand and relate to, such as a coloring book. The same applies to other target groups. If you are trying to reach those with a low literacy rate, printed material is probably not a good idea.

3. The budget and other resources

When you have chosen appropriate communications activities, estimate how long each one will take to organize and complete. Then budget your resources.

Be realistic. Make sure you can afford enough materials to make the project work. Making a TV commercial is pointless if you can't afford to send prints of it to all the TV stations in your area and run it for a long enough period of time.

Distribution costs – postage, mailing lists, courier services – can mount up so be sure to include them in your budget.

E. Selecting your assessment techniques

No matter how small or large your communications program is you need to consider the types of assessment as part of planning and developing your strategy. Assessment will help you:

- test ideas, messages and methods with members of the target groups – before you start your program;
- determine how well your communications program has worked with target audiences;
- improve various parts of your social marketing project;
- convince others that your project is worthwhile and should be continued;
- attract funding or sponsors; and
- promote or share your project with others.

Keep in mind:

Social change requires multi-faceted, long term initiatives. You may launch an excellent project and run it for six months but, at the end, be unable to point to a specific number of people you have helped. However one year later, with information from other sources and after giving your message more thought, a larger number of your target audience may have changed their behavior. So be realistic in your expectations.

Due to the mix of media, it is difficult to pinpoint the impact of any one part of a communications program. Each person responds differently to a message depending on their individual habits and state of health, social trends, new legislation and many other factors. Again, be realistic in your expectations.

Be honest in your assessment. We can learn as much from failures as from successes if the assessment is fair and accurate.

Types of Assessment

1. Formative research:

Formative research is the pre-testing of ideas, messages and products before they are used. Focus groups, interviews and pilot studies can be used to test planned activities and materials. This type of research is very important. It can help you change your program to make it work better and avoid costly and harmful mistakes.

2. Process assessment:

Process assessment is ongoing monitoring of your program. You'll want to know how well you're doing, in case you need to make any changes. Figure out how many people you reached with your message by keeping track of:

- The amount of radio and television time (in minutes) given to your health promotion project or message. For a fee, media monitoring services will track this information for you, or you could ask the stations for a rotation schedule of your PSAs and paid ads. How many people might have heard or seen these spots? Ask the broadcaster for an estimate of the number of people listening/viewing at that particular time of day.
- The number of articles printed in newspapers, newsletters and magazines measured in column inches or words. For a fee, media clipping services will track this information for you. How many people might have read the articles? Check the circulation figures for the publications.
- The number of education materials you handed out.
- The number of speeches, presentations, clinics or seminars you held. How many people attended? If you include events like this in your health promotion project, it is a good idea to have some form of registration for those who come. This gives you the option of contacting these people later to get their reaction to your project. What audience did you attract? Were they mainly male, female? What level of formal education? Higher or lower income? Where do they live? Were they the people you wanted to reach with your message?
- The number of contacts you made with other organizations.
- The number of inquiries you received, in-person, by telephone or mail.
- The number of organizations, businesses and media which played a part in your program.
- The response of people to presentations. Consider giving them a simple questionnaire to fill out.

3. Outcome assessment:

Outcome assessment looks at your results. Try to measure the impact of your communications program, and find out whether people changed or have started to change their behavior.

For more information or for help with program assessments, contact the Ontario Prevention Clearinghouse in Toronto. (See Appendix V.)

Here are some activities you may plan:

- Compare people's awareness, attitudes and behavior, both before and after your project. Or do a similar comparison between your target audience and a group that was not exposed to your program. You may want to contact your local university, community college or health unit for help in developing assessment questionnaires.
- Conduct interviews with members of your target audiences, or give people questionnaires. Do they now know more about your subject? Are they are going to make some changes as a result of your program?
- Try to measure specific actions people may have taken because of your project. For example, have more people signed up for non-smoking clinics, fitness or recreational activities? Have more people made appointments for blood cholesterol tests or mammograms? Has your organization, the municipality or other businesses set up new policies or activities because of your project?

Step 3
Developing your materials and activities

A. Developing messages and materials
B. Planning Media Activities
C. Planning Special Events

Having done your homework by looking into the issue, identifying your target audiences, defining your goals and objectives, and choosing your activities, you are now ready to develop the tools you need to communicate. These include refining the message, deciding on the format and choosing the means to deliver your message to your audience.

In this section, we will cover:

- **Developing messages and materials**
- **Planning media activities**
- **Planning special events**

Note: Worksheets for Step 3 can be found in Appendix II.

A. Developing messages and materials

Before you begin to develop or select materials and media strategies for your activity, a theme and logo should be created. With the theme in place, you can review existing materials for their applicability or produce new materials as required.

Creating a Theme and Logo

Theme lines and logos give your campaign its identity. They work best when they are used consistently in a high profile campaign over a long period of time. Their effect grows. They allow you to bring together a number of different events or services under one "umbrella." This helps your target audience hear your message in the midst of the barrage of commercial messages they receive every day. It also helps your target audience identify your message in all different media (e.g., radio, TV, newspapers, bumper stickers). Theme lines and logos help build awareness of your project or remind your target audience to take action.

1. A communications theme line

A communications theme line is a short, punchy version of your basic message. This line should be used in all your communications (e.g., posters, brochures, public service announcements) to remind your audience of your message and reinforce the basic thrust of your project.

In commercial marketing campaigns, this theme is called a slogan and we all know how well slogans can work. Slogans can be equally effective for non-commercial, social marketing campaigns. "If you drink, don't drive" comes readily to mind.

For help in developing your slogan and logo, contact your local college/university and recruit a communications/marketing instructor or student.

Since your campaign is likely part of a larger, comprehensive health promotion program, you may want to adopt an established theme. If you decide to create your own, remember:

- **Keep it short.** Eight to ten words at the most.
- **Use an active verb.** "Smoking kills" is better than "Smoking may be harmful to health."
- **Involve the audience.** Give them a sense of ownership. "Helping our kids avoid drugs" is better than "Helping kids avoid drugs."

The *A Change of Heart* slogan developed and used extensively by the East York Heart Health Promotion Program is effective because it identifies the subject (cardiovascular health), implies action (change of behavior) and, by playing on words, catches people's attention.

2. Capturing your theme in a logo

A good logo is a simple, graphic symbol that people can understand at a glance. Often it is an image that illustrates your theme.

Good logos are simple and memorable.

East York's *A Change of Heart* logo, for example, shows a heart shape evolving from a cut out design to a shadow to a full heart.

Reviewing Existing Materials

In reviewing materials during the planning process, you may have come across brochures, posters, public service announcements or videotapes that are ideal for your purposes.

Take another look at those materials. Now that you have identified your target audience, established your goals and objectives, and identified benefits for your strategy:

1. Do they contain the right information?
2. Are they right for your target audience?
3. Decide if the materials will be easily understood by your target audience. Literacy levels of the materials should match those of your target audience. One way to test materials for readability is with the SMOG test. (See Appendix IV.)

If you are still unsure, you may want to review the materials with a literacy consultant. The Ontario Public Health Association or your local board of health may be able to put you in touch with one.

Finally, contact the individual or organization that first produced the materials:

4. Are they available? For free? If there is a cost, can you afford it?
5. How have they been used? Were they effective? Are there any results you can look at?
6. Can you have permission to use either parts of, or all the materials?

It is extremely important to check this last point. The materials may be copyrighted, with the copyright owned by either the original creator or the organization producing the materials. You need to know who has the right to give permission to reproduce the materials.

For a selection of existing materials on a wide variety of health promotion issues, contact the organizations listed in Appendix V.

Creating and Testing New Messages

After choosing your communication theme and finding existing materials, you are ready to decide what new materials you have to create. Before putting a lot of effort into developing materials, check your budget to make sure you can afford to produce and distribute them. The most important part of the process is distributing your materials.

Creative Checklist

In designing your materials, keep in mind the following:

1. **Make the message as clear as possible.**
   You want your audience to receive the information, understand it, believe it, agree with it and do something about it. The message is more likely to be effective if you:

- Use action words and write in an active – rather than passive – voice. Say: "AIDS is the fastest growing viral disease in our country" rather than: "AIDS has been developing faster than anticipated."
- Use examples to clarify what you mean.
- Use as few technical/scientific/bureaucratic terms as possible. Avoid jargon and acronyms if your target group will not understand them.
- Include only information the audience needs to make a decision. Avoid lengthy explanations.
- Make sure the material is easy to understand. Use short sentences and simple words.
- Make sure your message does not blame the victim. It should support people's desires to change their own behavior.

2. **Make the communications activities effective.**

- **Be consistent.** All your communications activities should contain the same message. A common theme line can work well. Consistency helps build awareness: each piece of information reinforces another. Whatever approach or style you choose, use it in all parts of the campaign. Use the same colours, emotional tone, types of illustrations – even typefaces – in all your materials to reinforce the impact.
- **Put main points first.** Stress and repeat the main points in the message. Don't let less important information crowd out your main message. There's enough competition out there without competing with your own message for attention.
- **Stress benefits.** Emphasize how important your message is to the target audience. For your message to break through the "information clutter" it must be something the audience wants or has to know. They don't care what you want to say. They're most interested in how the information will help them – the benefit.
- **Get attention.** Materials should have impact. Use illustrations as well as statements and graphics that grab attention. If the message is printed, make sure the text is broken up with captions, headlines and sub-headlines, so that it is easier to read. A logo or theme will help people remember the message.
- **Make it as appealing as possible.** Poor quality materials are simply a waste of money, and they will make you less credible in the public mind.

One Message, Different Approaches

Just as you can think of many different ways to say the same thing, you can also find different ways to let your message "speak". One may work better than another. This is the time to find out which works best.

Look again at your program plan. You might choose several ways to get information across that would appeal to your target audience. You may find that you could use one or more of the following approaches:

- **Testimonials**. The experience of someone who has already coped with the issue can be very compelling. People giving testimonials must be believable. Ideally, the person should be interesting enough to be able to attract some attention to the issue.

  Doctors, scientists, or anyone in a position of authority regarding the issue, can be spokespeople. A celebrity can bring attention to an issue, but make sure the individual is credible. Often the most compelling testimonial can come from an ordinary person to whom members of the target audience can relate – especially if you allow the person to deliver the message in his or her own way. The target audience will then believe and be able to relate to the message.
- **Demonstration**. If your program requires some changes in behavior, then a demonstration of the desired behavior can work well. If you're preparing an audiovisual or a "how to" pamphlet, make sure the material is clear, direct and includes all the steps in the right order.

  The visual message is more important than the verbal message. Use simple dramatic visuals.
- **Animation**. "Cartoons" can be eye-catching for both children and adults. Animation works well if you are talking to several ethnic groups: animated figures are more universal than "real" people. The exaggerated behavior in animation can also illustrate an abstract idea or help get across a sensitive subject, such as contraception.
- **Humour**. Humour can help people remember your message. Keep in mind, however, that punchlines can become stale and are best for short term campaigns. Also remember that what might seem funny to one group, may seem silly or offensive to another. It's crucial to check your approach with the target audience – before you launch your program. Bear in mind that, in some situations, humour is just not right. For example, there is nothing funny about a life-threatening disease.
- **Emotion**. Adding an emotional appeal to your message can make it seem more real and personal. Emotional approaches can range from warm to heartbreaking, depending on your issue. Be sure to pre-test your materials carefully since what tugs at one set of heartstrings may not have the same affect on another.
- **Music**. If you are doing an audiovisual, music can add to your message. Again, check it out with the target audience before producing the final version. Make sure the music doesn't drown out your message or that it isn't so captivating that listeners ignore the message.

NOTE: Remember to test your materials for readability. There is a clear relationship between literacy and health. People with low literacy skills are likely to be in worse health than people who are more literate. See the SMOG Readability Index in Appendix IV.

Testing Ideas

Even though you have thoroughly researched your subject, check your materials with the target audience. What may be clear to you may be confusing to others. After all, you probably know more about the subject than they do. Testing several different messages will:

- Help identify which ones appeals most to the target audience.
- Bring out new ideas which may work better than the ones you've chosen.
- Pick up any terms or language the target audience finds confusing or difficult.
- Get rid of any ideas which don't work or aren't relevant.
- Save money – because only ideas which work will be produced.

This last point should be stressed because your materials are one of the most costly steps in your communications program. Remember, testing materials can help, but your final decisions should be based as much on your own experience and intuition as on test results.

Preparing rough drafts

When you have chosen your message, approach, and the various communications components, develop rough drafts of the material. Then see which one(s) the target audience likes best.

Don't think that the target audience won't grasp the concept unless it's in a finished form. Just as you can imagine how something will look or work, so can your target group. At this stage, you are merely testing the *ideas*, not the finished piece.

- For a poster or pamphlet, a rough draft can be a freehand drawing of what you had in mind, or a similar visual taken from a magazine or another source.
- For a radio commercial, you only need a script, which you can tape record yourself or read to the group. If you feel the idea needs music, use music that sounds similar to what you have in mind.
- For a videotape or television commercial, set out the key images like a comic book, with the words written underneath.
- For a community event, you should have the day, time and location as well as a rough agenda listing who could participate and what they would do.

Types of testing

There are two basic approaches for testing ideas.

In the *central location intercept* method, you develop a brief questionnaire and find a busy spot where members of your target group pass. You approach people and ask them to take part in your test. First you ask them a few general questions, then show them the material. Ask a few follow-up questions, then thank them for their help. You may want to offer them a reward or incentive for answering your questions – perhaps a button or pin.

In the *focus group* method, you gather a group of eight to 12 people in a quiet location and explain your health promotion project and your communications program. You then show them your rough drafts. Their responses can be quite revealing and can guide you to the best approach.

For the most accurate and useful results, both types of testing are best done by professionals. You may want to hire or recruit professionals to help you design the questionnaire and/or conduct the focus group session. If you decide to conduct your own tests, see Appendix IV.

A useful document – "Developing readable Health Materials" – is available through the Ontario Public Health Association office. (See Appendix V.)

Producing Effective Print Materials

Now that you've decided which approaches are most likely to work with your target audience, you're ready for final art and production. Here then are guidelines for each communication piece.

1. Writing print materials

- Break up the text as much as possible, to make it easier to read. Use headlines, subheadings, bold typeface, boxes, and "bullets."
- Avoid jargon and abbreviations the target audience may not understand.
- If your subject is complex or scientific, add a glossary.
- Have the material proof read by someone else. It is very difficult to proof read your own material. Spelling, editing and correct language are very important.

2. Artwork for printed materials

One member of your group may be a budding designer, or you may be dealing with a printer who can do layouts for you. Here's a checklist for your artwork:

- Ask about adapting existing materials to cut costs. Graphic artists can "cut and paste" to fit illustrations and logos to your needs. Be sure you have permission to use the materials.
- Use graphics that are simple and easy to understand. Make sure they don't compete with the text.
- Avoid small print (less than 10 point type size). It is hard to read – especially if the piece is designed for an older audience.
- Make sure photographs will reproduce well, and don't use drawings that look amateurish.
- Ask the artist's advice in breaking up text by using different typefaces, boxes, headlines, etc.
- Graphic design is subject to fads and fashions. Use your common sense. Ask yourself: Is the message clear? Is the "feeling" or "tone" the one we want? Can we produce it within our budget and time frames?

Five Factors That Effect Print Cost

Print materials can be produced in two ways: printing and photocopying. If an organization donates the use of its photocopier, photocopying can often be done cheaply. If materials are photocopied, you can expect each photocopy to cost the same, no matter how many you produce.

But as we are stressing quality materials, let's focus on the printing process. There are five factors that affect print costs:

- **Quantity**. The greatest expense involved in printing is making the printing plates. Once the plates are made, the more copies you print, the lower the cost for each printed item. For example, a one-sided black and white flyer might cost:
- $50 for 1,000 copies ($.05 a copy)
- $75 for 2,000 copies ($.0375 a copy)
- $100 for 4,000 copies ($.025 a copy)
- **The Printer.** Every printer works differently and probably has different types of equipment. Price will differ from printer to printer. Be sure to get estimates from several printers before choosing one. This is standard practice. Ask them for samples of their work and for references, so you can check quality.
- **Artwork.** Printers charge more for materials that contain illustrations and photographs. Show the printer your artwork before asking him to quote. If the costs are too high, the printer can suggest ways to simplify the artwork to bring the price down.
- **Ink color**. Materials printed in only one color (e.g., black on white paper) are the cheapest to produce. Prices go up with each color you add. Black will be the cheapest choice for quantities under 10,000.
- **Paper**. Paper comes in different weights, colors and finishes. Your printer can show you samples, and there is probably a paper stock for every budget. If the first quote seems high, ask the printer to use a cheaper paper stock. Also, consider using recycled stock, if possible.

(adapted from *Making Health Communications Work*, National Cancer Institute, 1989)

Concepts and words differ from culture to culture. Don't just translate the text.

3. Preparing print materials for cultural groups or special audiences

- Don't just translate the text from English or French. Concepts, appeals and especially words, differ from culture to culture. Work with a focus group to develop and test the material.
- A picture *is* often worth a thousand words. The right illustration can help cut through language barriers. But test any illustrations you may use. People perceive illustrations in

different ways. For example, a cartoon of a pig might seem humorous to the members of the mainstream, but could offend others. Any photographs you use should include members of the group.

- Some groups may have their own media such as newspapers or newsletters which would be a good way to communicate your message.
- If possible, include endorsements from appropriate community leaders.
- Bilingual or multilingual material may help reach some members of your target group. Keep in mind that – if your materials work – you may receive inquires in the languages you have used.

For a list of reading material which might help you with this, see the bibliography.

B. Planning media activities

Media activities and advertising are important for the publicity and promotion of your project and message. In this section, tips for creating and using advertising in various formats are presented. Also, suggestions for building good media relations and for writing media releases are outlined.

Advertising Effectively

A lot of what makes print materials work applies to paid advertising as well. A single, simple message always pays off.

1. Newspaper Advertising Tips

A lot of the advice in the section on printed materials can be used in preparing newspaper ads (e.g., break up the text, use large enough type sizes).

- Make sure that your main message is in the headline in large type. Few people read the small type or body copy. The headline should grab the reader's attention and make him or her want to know more about your message.
- Design your ad to stand out. Set a border around it, include a striking photo or illustration, or use spot color.
- Newspapers are a good immediate medium. For example, if you want people to come to an event, run a newspaper ad that day or the day before. Few people read newspapers two or three days after they are published, so they are not a good place to put messages that require long-term thought or action.

2. Television advertising tips

We are assuming here that you are creating public service spots for use on local TV stations. Here are some tips to consider.

- **Format**. A television commercial should be 30 seconds or 60 seconds long. While some stations now carry 15 second or 10 second commercials, your commercial will have a better chance of being aired if it is in one of the longer formats. Supply the commercial on 16 mm film, or videotape: 2", 1", 3/4" or 1/2" professional or broadcast quality formats are acceptable.
- **Length**. At a normal rate of speech, there is time for approximately 60 words in a 30 second commercial and 120 words in a 60 second commercial. Choose your words carefully. Make only one or two key points and repeat the main point as often as possible.
- **Impact**. TV is an effective medium because it involves sight, sound and emotional impact. Take advantage of these qualities. Identify your main issue in the first 10 seconds of the commercial, in a way that grabs attention.
- **Repetition**. Repeat the main point at the end. You may choose to print the message in words on the screen to reinforce it.
- **Tone**. Be positive. Recommend a specific action. Present facts in a simple, straightforward manner. Stress the solution as well as the problem.
- **Supers**. If you want the target audience to call or write in for more information, show the phone number or address on the screen for at least five seconds, and say the number at least twice.
- **Style**. Use an approach (testimonial, humour, demonstration) that is right for the issue and make it believable. The commercial should be consistent with other materials in your program.
- **Music and pictures**. Pre-recorded music and stock images are available but are under copyright. You must get (and usually pay for) permission to use them.
- **Budget**. Contact your local university, community college or high school. See if it has a film or broadcasting course. Explain your project and ask if facilities and/or students could be "donated" to help produce commercials. Perhaps your project could become a class assignment.

3. Radio Advertising Tips

Many of the TV tips also apply to radio. Remember: with radio, you only have only sound to create impact.

- Make your message more memorable by using music, sound effects and a pleasing announcer. For a small fee, most professional radio deejays will record your message. Ask your local radio station to recommend someone.
- If a phone number or address is an important part of your message, repeat it more than once during the radio ad – particularly near the end of the message – to let people get the number down.
- As you are relying on sound alone, repeat the main message more than once, too.
- Most radio stations now have their own sound (e.g., country and western, soft rock, middle of the road). Make sure the style of your message matches the station's style.

Building Good Media Relations

If you want good publicity for your project, build good relationships with the media in your geographic area. Remember: you cannot control what the media will say. They may be critical, perhaps in ways that you think are unreasonable. But if you have a good health promotion project that fills a real need in the community, the media reports will likely be fair. The attention your project will receive makes media involvement worth the risk.

Create a media list

Make a list of all the media in the area, then contact each one to find the name, mailing address (it may be different from the head office), and telephone number of the person to whom you should send your press releases. Choose the media and the people who will help you reach your target group. Your list will probably include national, regional and local media.

Other organizations in your area may already have such a list and be willing to share it. If not, the Yellow Pages, the local Chamber of Commerce, your local TV guide and newsstands are good places to start.

Your media list should include:

Print:

- daily newspapers
- weekly newspapers
- community newspapers
- ethnic newspapers and magazines
- organization publications (e.g., religious, business, school, sport).

Broadcast:
- television stations seen in your area
- cable companies operating in your area
- radio stations heard in your area.

Create media profiles

Gather information of your own to create a profile on each of the news outlets on your list. Who can help you? How can they help you?

Your media profile should include:

Print profile:

- Who should you send your news stories to?
- Is there a feature story writer interested in your cause?
- Who writes the editorials? Will they endorse your campaign?
- Are guest editorials or opinions accepted? Who is the contact?
- Are there any columnists you should contact?
- Who is responsible for "Letters to the Editor"?
- Is space set-aside for community service announcements? Who is the contact?
- Is there a community calendar? Who is the contact?
- Are public service advertisements accepted? Under what terms? Who is the contact?
- What are their deadlines? Daily? Weekly?

Broadcast profile:

- Who should you send your news stories to?
- Do they broadcast guest editorials or viewpoints? Who should you contact?
- Are there any talk shows you could get on? Who is the contact?
- Are there any people who have their own shows who would take up your cause? Who are they?
- Does the station produce its own documentaries? How would you get a documentary produced on your campaign?
- Does the station broadcast upcoming community events? Who is in charge?
- What is the station's policy towards Public Service Announcements? How can you get yours broadcast?
- What are their deadlines?

Ask for advice and help

Before you go to the trouble and expense of preparing material for the media, ask their advice. Will they be interested in what you have in mind? What angle or local hook would they use? Make some friends in your local media and ask for their opinions ... but never pressure them to publish anything or you will soon lose their friendship.

How To Write a Media Release

Editors want news, and they want material that doesn't need much re-writing or editing. Accuracy, spelling and grammar are important. Have someone proof your material.

Remember: media people are busy and staff turnover can change a news group's attitudes and focus. It's best to stay in touch.

Format

- Media releases should be double spaced, with a left margin of at least 1 1/2 inches and generous margins on the right, top and bottom of the page.
- Include the date of the release on the top right of the page, above the headline. If the timing is important – for example, if the release is about an award that has not yet been given – write "Not for release before (date of the award)." Otherwise, you can either write "For immediate release" or put nothing above the date of the release.
- Give the name of at least one – preferably two – contact people at the bottom of the release, with full address and daytime phone numbers.
- Be brief. Limit the release to one page, two at most. Type on one side of the paper only.
- Use a headline that flatly states what the story is about. Don't try to be cute. Editors normally write their own headlines anyway, to fit the space.
- Don't put in sub-headings or other editorial touches, such as bold typefaces and underlines.
- Indent paragraphs by five spaces and don't leave space between paragraphs.
- Write "more" at the end of the page if there's another page. Never split a paragraph between pages.
- At the end of the story write "end" or "-30-" to indicate the end.

Content

- Media people are busy so catch their attention and give them the facts quickly.
- All the important information should be in the first paragraph, which should be no more than three to five lines long.
- The first paragraph should also contain the answers to the classic journalistic questions: who? what? where? why? when? and how?
- Editors usually cut a story from the bottom, so give the other details in descending order of importance.
- Be accurate. The media prides itself on its accuracy, and the editor may not have time to check your story's facts. Make sure you do. Misspelled names, wrong dates, spelling mistakes or other errors may mean they will never use your material again. Have someone other than the writer proofread the material.

Style

- This is not the place to dazzle the reader with your prose. The writing should be simple and unadorned. The facts should be stated plainly.
- Keep sentences short.
- Don't generalize and don't exaggerate. Instead of saying, "Smith county has lots of cases of measles", say "Smith county reports 50 cases of measles, up from 35 cases last year."

- Keep adjectives to a minimum, using facts and numbers instead. Rather than saying, "A new and rapidly growing organization", say "Founded in 1988, the organization has grown to 2,000 members."
- Use quotes for information that is not factual or that blows your own horn. For example, "Ray Smith, spokesperson for the Department of Health said, 'This is the most dynamic program to come along in years.'" If you don't know the exact words, use an indirect quote (e.g., A spokesperson for the Department of Health praised the program).

Photos

- Include a photo with your media release if possible: it may help make your project more visible. But photos are expensive, so don't send one unless there's a good chance it will be used. Check with the newspaper first, and don't expect to get the photo back.
- Send black and white photos with a glossy finish, preferably sized to 5" X 7".
- Be sure the photo is sharply in focus and has good contrast.
- Include people in the photo, close-up enough so you can see their faces. Have them doing something other than posing for the camera. For example, for a "Healthy Mothers/Healthy Babies" project, you could photograph a pregnant woman in the fresh produce department of your local supermarket.
- Always identify the photo, either on the back or on a caption sheet taped to the back of the photo. List the names of the people in the photo, the event, the date and a telephone number for further information. Be sure you have the permission of the people in the photo to use it for publicity.
- Don't bend the photo or fasten it to the release with a paper clip.

Mailing

- Send your release to the section of the newspaper or media outlet best suited to the story. For example, a Healthy Babies program would be of interest to the Women's or the Lifestyle Editor, while a fund raising party might be more of interest to the Community Calendar or Social Notices section. If in doubt, send it to The Editor, who will pass it to the right section.
- If possible, write to the editor or writer by name. You should be familiar with the media you want to reach by reading their papers or watching their programs. However, if you don't know the names, call the paper and ask.
- Releases should reach the media one full day before the deadline.

C. Planning special events

Special events can serve many functions in implementing your project, such as increasing publicity and promoting community involvement. Frequently you will find that sponsorship is needed to undertake special events. The following section presents tips for organizing special events and notes some of the benefits and pitfalls involved in selecting a sponsor.

Making the Most of Special Events

Special events are held to raise funds, give out information or – perhaps more importantly – to recruit support. Events draw attention and people. They are an excellent way to develop one-to-one relationships with people who are already aware of your issue and/or health promotion project and who may be willing to volunteer their time or services.

A successful special event takes organization, volunteers, time and – most often – money. Because events are risky, it is best to gain experience by being part of someone else's special event before you try it on your own.

Tie-in to community special events

Wherever the people you want to reach are gathered in numbers, you have a chance to promote your cause. Look for events like:

- fairs
- sporting events
- rummage sales
- community hall activities
- amateur theatre, puppet shows
- church events.

Don't forget shopping malls and large stores, especially on Saturdays when the crowds are at their largest.

Contact the organizers, owners or people in charge. Tell them about your health promotion project and ask if you can take part in their event. As long as what you want to do doesn't conflict with their plans you may be able to:

- put up your posters
- distribute your leaflets
- recruit new members
- ask for contributions
- set up a display or booth
- join in the fun.

It's all a matter of negotiation.

The Importance of Partnerships in Special Events:

As with most health promotion projects, partnerships with other organizations, groups and agencies can lead to more success. Partnerships can help ensure that your messages are consistent and that your work with the media works better. Working with other groups also allows you to share tested materials, technical support and assistance for various projects. Two heads are better than one – so are two budgets!

Organizing your own special events

Before you start planning, check with City Hall to find out the kinds of events allowed in your community and whether you need a special permit or license. Some fund-raising events, like bingo and lotteries, are very strictly controlled.

Your event should reinforce or demonstrate your message, down to the smallest detail. For example, don't serve donuts at a health/diet related event.

Timing is critically important.

Timing is critically important. You want lots of people to attend your event, so don't schedule it at the same time as other events in your community – unless you are tying-in with them. Check with other organizations and look at back issues of the newspaper to make sure there isn't a conflict.

Because it costs money to put on your own special events, fund-raising is almost always a major component.

Sponsored sporting events are among the best special events. For these, you recruit people to jog, run, swim, bicycle, cross-country ski ... you name it. These people get others to sponsor them for so much a lap or kilometre. These events can be great fun and, in some communities, have grown to be highlights of the season. Recruit people or teams from competing law firms, schools, colleges or businesses: it adds to the fun and makes it easy for the participants to get sponsors from within their organizations.

How to stage a kick-off event

Kick off your health promotion project with an event which can:

- Create a focus. It gives your organization and the people you are working with a date when all materials and plans must be ready.
- Make a relatively low-key activity an "event." By launching all activities on the same date, you make it newsworthy. It becomes something that demands awareness – which is the first step in your program.

To host a successful kick-off event, you will need:

- News. Journalists look for a "hook" or "angle" – a reason to include the story in their paper or news program. What is new or noteworthy about your project? Do you have new and reliable local statistics about the issue? Do you have high profile individuals as spokespeople? Are you organizing other related events? Picture your local reporter on television, microphone in hand, saying "XXX organization today announced ... ". Once you can fill in those blanks, you have your news and can begin setting up your event. Unless you have a news hook or angle, a kick-off event is a waste of time, effort and money.

- A convenient location, large enough to hold a number of people, with telephone facilities and areas for cameras and lights to be set up. Use a hotel banquet room, a board room in your offices or in some other office, a church hall or a school assembly area.
- Or choose a place that will add to your message (e.g., the bus terminal for a street youth drug program, or city hall for a city-wide anti-drinking and driving program). Or use a location where you will have contact with your target audience. The cameras and activity may rouse their curiosity and be an important step in raising awareness of your program.
- A spokesperson and a master of ceremonies, both members of your group.
- Background kits, one for each member of the press you expect to attend. Each kit should include:
    - the facts and figures (made as local as possible) about your health issue
    - your goals and objectives
    - the methods you intend to use
    - the nature and make-up of your organization
    - the names of any prominent local people working with your organization
    - the name, address and daytime telephone number of the spokesperson to be contacted for further information.

Providing this background information to the media will help ensure that they use the correct facts in their stories.

Kick-off Event Etiquette

The MC should briefly:

- Introduce him or herself and his/her relationship to the program.
- Thank the media for coming.
- Introduce the experts and special guests.
- Introduce the spokesperson.

The spokesperson should briefly:

- Describe the program, what it hopes to accomplish, timing and other details in the press release.
- Ask the media for questions and answer them.

Remember that the media's time is limited, so don't waste it. Make the formal part of the event as brief as possible – 15 to 20 minutes at most – and the question period no longer than half an hour.

Because of press deadlines, the best times for a kick-off event are early morning (9 to 10 a.m.), at lunch (Noon to 1 p.m.), or late afternoon (4 to 6 p.m.).

Have people who are experts on the issue on hand. They will be able to answer more in-depth media questions and give your program credibility.

If you can't answer a question, don't fake it. Be honest. Say you don't know, but that you'll find out. Take down the press name and number of the person who asked the question. Call him/her with the answer as soon as possible.

Invite any supporters who would interest the media (e.g., the Mayor, local celebrities, representatives of any group that may be supporting you).

Provide some sort of light refreshment for the press such as coffee or fruit juices.

Timetable for a kick-off event

- Send out invitations to the media one week before the event.
- Telephone people two days before the event. Ask if they received the invitation and if they plan to attend. Be prepared to entice them to attend by repeating the news hook or angle and by telling them who will be speaking and how important the project is. Don't be surprised if some media say they will attend and then don't. Press are often sidetracked by a different story.
- On the day of the event, have enough press kits for everyone. Greet the press when they come in, identify yourself and ask if there is anything you can do (e.g., get participants together for a photo, single out the spokesperson for an interview).
- If the media gives you coverage, be sure to thank them. Call them or drop a note to let them know you appreciate their support.

Working With Sponsors

As we discussed in Step 2, private sector sponsors can be valuable partners in your health promotion project. Some may donate money while others may give time and materials.

Approaching potential sponsors

Personal contact is one of the best ways to find sponsors.

- Invite prominent business leaders to a private reception where you can ask for their help. In return for donations, make them program patrons.
- Ask business people to sit on steering committees.
- Visit your local Chamber of Commerce to get their endorsement. Ask for lists of all businesses and help in meeting possible sponsors.

When you approach more marketing-oriented sponsors, be ready with a well thought-out presentation or corporate prospectus. The presentation should include:

1. Your target groups
2. Your objectives
3. The opportunities and benefits for the sponsor
4. The program activities
5. What you want the sponsor to do (e.g., donate resources and funds)
6. What you will give the sponsor in return.

Convince the sponsor that his/her business sales, company or product image and name will benefit from being involved with your program.

Identify the benefits

Possible sponsors want to know how you will promote their sponsorship. Consider the following ideas:

- Feature the sponsor's name/logo on all communications materials, such as brochures, posters, press kits, banners.
- If you have a program logo, allow the sponsor to feature it (e.g., on their business letterhead, in stores, on staff buttons, advertising).
- Offer the sponsor the chance to say a few words at public events that are part of your program.
- Create an award named after the sponsor and feature that award in press releases, conferences and special events.
- Offer the sponsor free advertising space in any of your brochures or publications.

When you have a list of likely sponsors and have written your prospectus, call to set up a meeting with the business owner or president. The president of larger companies may pass you along to the marketing manager, but his/her initial interest may be the door opener you need.

Try to use personal contacts. Establish a board of directors or corporate fund-raising committee of business people to help direct your corporate efforts and open up business opportunities.

Pitfalls to Avoid

While most corporate sponsorships can work to everyone's benefit, be aware of the following:

- Ensure that the ethics of your group or program are not compromised by the wrong sponsor or activity. A fitness clinic or event sponsored by a tobacco company or brewery gives conflicting messages to your target group.
- If your organization has a professional logo, be very careful about allowing that logo to be used on sponsors' products. Set up strict criteria for the use of the logo or develop a separate logo with your message for the sponsors' use.
- Prepare a letter of agreement between your group and the sponsor. Include the responsibilities of both parties so the partnership is clearly defined.
- A local community program may not be eligible for sponsorship by national or multinational companies. Look for locally owned and operated businesses, franchises or head offices of larger companies located within your community. Or approach the larger provincial or national companies by proposing that your community program be a pilot test for later expansion across the province.
- One final point. Don't ignore your sponsors once their cheques are in your hand. The business community is small enough that word of a bad experience with your program will spread. To keep a good working relationship with sponsors:
  - Assign a staff member to look after your corporate sponsors throughout the program.
  - Invite sponsors to all major programs events. Have a staff member accompany the sponsors at such functions and introduce them to important people.
  - Make sure that their corporate names are spelled properly in all materials and press releases.
  - Keep sponsors up-to-date on the progress and success of your program.
  - Thank your sponsors publicly for their support.
  - Above all, be considerate.

Sponsors will appreciate your concern, feel good about their role and, most importantly, be a willing sponsor next time you need them.

Step 1
Getting started
Step 2
Planning and developing your strategy
Step 3
Developing your materials and activities
Step 4
Writing your social marketing communications plan
A. Reviewing your social marketing campaign
B. Setting program time lines
Step 5
Implementing your plan
Step 6
Measuring results

Once you have ...

- defined your issue
- assessed your resources
- found out everything you can about your issue
- identified your target audience
- set your goals and objectives
- identified the benefits
- chosen your activities
- selected your assessment techniques
- created a theme and logo
- reviewed existing materials
- created and tested new materials
- planned media relations
- considered special events
- considered working with sponsors

you can now consider writing it all down in one clear communications plan.

We have now followed the steps in planning a social marketing campaign. These steps can be applied to a number of social marketing strategies, whether you are trying to change a corporate policy or set up a neighbourhood smoking cessation program.

In this section we will cover:

- **Reviewing your social marketing campaign**
- **Setting program time lines**

Note: Worksheets for Step 4 can be found in Appendix II.

A. Reviewing your social marketing campaign

At this point, you should review your social marketing campaign in light of the basic four P's of commercial marketing and the fifth P (participation) outlined in the Introduction. By comparing your proposed campaign to this model, you may discover you have missed something or that one or two parts of your plan need more work. If your campaign meets the criteria, it will be easier to complete the actual social marketing communications plan.

Your communications plan should clearly and logically summarize what you want to do and how you are going to do it. The worksheet for Step 4 (see Appendix II) is a sample outline of a communications plan. It contains the bare bones of a good strategy. Your plan may follow a slightly different format or include more details.

You will notice that the sample outline of a typical plan includes the method of assessment, which is an important element of any successful project. Assessment keeps you on track, lets you find any new opportunities for improving the program, and allows you to measure the impacts of different parts of your program.

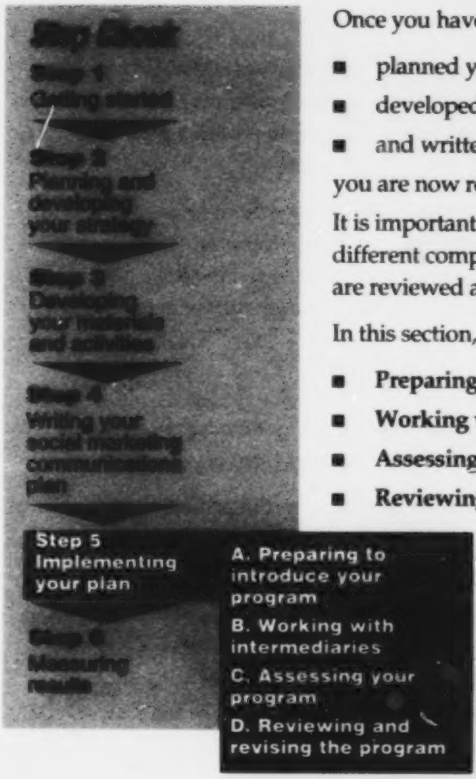
B. Setting program time lines

The last – and perhaps most important – step before implementing the plan is to develop a timetable. It should include every task and assign each task to an individual. The more details you build into the program at this stage, the better your chances of success. Here's what a portion of a timetable might look like:

Planning Tasks	**Person Responsible**	**Due Date**	**Resources**
Draft media plan	Avril D., Media Comm.	5/30/90	time: 20hrs cost: $25.
Action Tasks	**Person Responsible**	**Due Date**	**Resources**
Check supply of existing brochures	Ali Hosna	5/01/90	time: 4hrs.
Assessment Tasks	**Person Responsible**	**Due Date**	**Resources**
Questionnaire development	Barb Kirsten	5/17/90	budget for consultant to be determined

(adapted from *Making Health Communications Work,* National Cancer Institute, 1989)

Think of your communications plan as a blueprint for your project. Each part is identified, each task is assigned. The blueprint will help keep people on track, on time and on budget. It will also help to bring new supporters up to speed so they can contribute more to the overall success of your project. The time lines should be flexible, a tool you use to keep everyone focused. Of course, they will have to be updated as you monitor your progress and as new opportunities arise.


Step Chart
Step 1
Getting started
Step 2
Planning and developing your strategy
Step 3
Developing your materials and activities
Step 4
Writing your social marketing communications plan
Step 5
Implementing your plan
A. Preparing to introduce your program
B. Working with intermediaries
C. Assessing your program
D. Reviewing and revising the program
Step 6
Measuring results

Once you have ...

- planned your program
- developed your materials
- and written your communications plan

you are now ready to implement your plan.

It is important at this stage to assess the effectiveness of the different components of the program. Program components are reviewed and revised as necessary.

In this section, we will cover:

- **Preparing to introduce your program**
- **Working with intermediaries**
- **Assessing your progress**
- **Reviewing and revising the program**

Note: Corresponding worksheets for Step 5 can be found in Appendix II.

A. Preparing to introduce your program

You want your campaign to run as smoothly as possible. Unexpected opportunities and problems are sure to arise. Be able to react quickly. Be prepared to take advantage of the unexpected "signal incident" that draws attention to your issue.

It is important that publicity activities are done in conjunction with other program activities.

Make sure that the communication lines within your group and with your partners are clear. Make sure everyone knows who to contact if opportunities or problems crop up. There should be one person or facilitator who keeps on top of day-to-day events and who can alert the co-ordinating committee.

Establish regular meetings between key partners in the campaign. This keeps everyone up to speed on the project. It can also provide a forum to discuss new ideas and opportunities. If meetings are difficult to organize because of schedule conflicts or geography, set up teleconference calls through Bell Canada. You should schedule telephone checks – at least once a week – between the facilitator and members of the co-ordinating committee.

B. Working with intermediaries

Intermediaries are the people you have recruited to help with your social marketing campaign. They may be doctors, teachers, police officers or others who play a key role in the one-to-one communication aspect of your campaign such as taking part in a public forum or appearing at your booth at a community event.

Often these people have very busy schedules but have offered to volunteer their time and expertise. Treat them with the same respect you give to all your supporters. Make sure they know when and where you would like them to be (e.g., for an event), how long you would like them to stay, and what exactly is expected of them. Be sure to thank them for their help.

C. Assessing your program

Assessment should be built into every step of your program.

While your instincts may tell you that your program is moving along smoothly, nothing can take the place of a solid assessment. Assessment should be built into every step of your program.

Be sure to have data collection forms prepared at the beginning of the project so that you can measure the process of implementing your project. For example, when distributing print materials, do you know how you will record the numbers distributed and to whom?

Assess honestly all aspects of your communications program. If one element – a flyer, press conference or whatever – was a success, you will want to know why so you can print up more copies and/or repeat it with your next project. What you learn from your assessment will let you revise and improve parts of the your program.

The Assessment Checklist

Your assessment check list should include:

1. Inquiries and participation levels. Are they as high as you estimated? Are they higher than you expected? Why?
2. Mid-way through your campaign, are you reaching your audience awareness targets? Are you exceeding them? Why?
3. Are you reaching or attracting new target audiences? Why?
4. Have you access to communication channels you had not planned for? Why? And are you making the most of these new channels?
5. Check your distribution points. Are they working as well as you planned?

Each of these assessment points offers opportunities to fine-tune your social marketing program and make it work better.

D. Reviewing and revising the program

A good social marketing program is flexible. It responds to the changing needs of the community. Use the results of your on-going assessment to improve your program during its implementation. Your progress and the opportunities to revise the program should be on the agenda of your regular meetings with key partners.

Step Check
Step 1
Getting started
Step 2
Planning and developing your strategy
Step 3
Developing your materials and activities
Step 4
Writing your social marketing communications plan
Step 5
Implementing your plan
Step 6
Measuring results
A. Writing the assessment report

No program will ever be perfect – there will always be room for change and improvement. By following a sound assessment process, you will gain information which can help you and others improve your social marketing campaigns. Accurate, fair and honest assessment can help identify the best techniques. Share your results with other groups so the benefits of your experience spread throughout the community.

This section will review the assessment report.

Note: Corresponding worksheets for Step 6 can be found in Appendix II.

A. Writing the assessment report

The Assessment Report is a written report of your findings. It can be used:

- to help you repeat the parts of the campaign that worked
- to help you refine other parts to make them work better
- to help others launch similar social marketing programs.

You should summarize in one place the results of your evaluation efforts.

Some of the process outcomes involved in implementing your project could include:

- the number of educational materials developed
- whether PSAs were aired at the "right" time
- whether your actual audience included your target group
- the number of inquiries about your issue or project
- the attendance at events or activities
- the extent and form of media coverage.

Outputs should be summarized as well. For example:

- Were there any organizational changes (e.g., new policies, by-laws, adoption of the program)?
- Were there changes in awareness levels or intentions to change behaviour (as determined by a survey)?

Try to keep your report brief. Attach support material as appendices. Write a short, point-form summary and put it at the beginning of your report. The report should include:

1. Background on the objectives and purpose of the project and its communication program.
2. An outline of the project activities, noting which ones were measured.
3. Details on how you did evaluations (e.g., surveys, record-keeping).
4. Any difficulties you had during the program – and how you overcame them – or any problems you had measuring results.
5. Actual results. Describe them, provide numbers of participants, articles etc.
6. Recommendations or things you see that should be changed, as a result of your evaluation.

To apply what you have learned, ask the following questions:

- Do you need to revise your goals or objectives? Were they broad enough? too broad? Have they been achieved with one target group and not another?
- Is there new information on your issue which should be worked into messages?
- Which activities worked? Should they be repeated, expanded or used with other target groups? Or should they be ended because they were successful?
- What are the areas which require more work, more resources or possibly a different approach?
- Compare the costs of different activities (including staff time). How effective were the activities?
- Should the project be expanded, possibly with the help of other organizations?

Share your report with everyone who helped with the program. They will want to know how well the program worked. Ask them to comment on drafts of the report. In the report, thank them for their support.

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Every field has its own jargon, and communications is no exception. Here are definitions of some of the terms used in the preceding sections, listed alphabetically.

Body copy: The text or "copy" which appears below an ad heading or sub-heading. Detailed information is provided in the body copy.

Control group: In research, a group which has not been exposed to a program, and which can be compared to those target groups which have received the program.

Direct mail: Promotional material received through the mail.

Focus group testing: Focus group testing is a structured discussion between a professional moderator and a group of three to twelve people who are representative of the target audience. New creative concepts and/or materials for a program are "tested" by presenting them to a group of people for their discussion. The results of a focus group test can tell you if you are on the right track or not.

Impact assessment: Long term assessment of observable social changes, such as changes in health status.

Logo: A graphic symbol, with or without words, used to identify an organization or program.

Outcome assessment: Assessment techniques to measure the observable results of specific programs.

Process assessment: Assessment techniques to monitor the observable effectiveness of activities while a program is in progress.

Pub-set: Publication-set means that the publication (newspaper/magazine) will typeset your ad.

Social marketing: The design, implementation and control of programs designed to influence the acceptability of a social idea or cause by a target group.

Spot color: Use of only one color in one or more specific areas on any printed piece.

Story board: A series of illustrations with captions used to convey a creative concept for a television commercial.

Super: Superimposition: Generally in video or film, words or visuals overlaying other images on the same screen.

Target audience: The group of people the communications and social programs are designed to reach and the group whose attitudes and behavior you wish to change.

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A. Defining your issue

1. What is the health issue? ______________________________

2. Who is affected? ______________________________

   ____

   How are they affected? ______________________________

   ____

   ____

3. What level of awareness do they have of the issue and its impact? __________

   ____

   ____

4. Who else is interested in the issue?
   (e.g., individuals, groups, politicians, media) ____________________

   ____

   ____

5. What activities have already taken place? ____________________

   ____

6. What are the gaps? ______________________________

   ____

   ____

B. Assessing your resources

1. What information is available on the issue? ______________________

____

____

2. What are the gaps in the information available? ______________________

____

____

3. How many staff and/or volunteers are available?
(e.g., personnel, committees) ______________________

____

4. How much money is available? ______________________

5. How much time is required?
(i.e., time on a daily, weekly, or monthly basis required) ______________________

____

6. What is the environment like?
(e.g., community support, legislative support, timing) ______________________

____

____

7. What media involvement has occurred?
(e.g., coverage, editorial positions, unique local aspects) ______________________

____

C. Discovering key details about your issue

1. Describe the issue:

How many people does it affect?

How often does it occur?

What are the effects on individuals, families, the community?

What are the causes?

What are some preventive measures?

2. Describe the people affected:

Age, sex, ethnicity, income, residence, marital status:

What is the behavior that impacts on the problem?

Are there any information/comprehension gaps?
(i.e., about the health problem or the behavior the program is addressing)

What health facilities or services do they use?

What mass media outlets do they watch, listen to, read?

What other sources/influences would the group believe?

A. Identifying your target audience

What is your primary target group?

(Describe their physical, behavioral, demographic, attitudinal characteristics)

What is your secondary target group?

(Describe their physical, behavioral, demographic, attitudinal characteristics)

B. Establishing your goals and objectives

State your goal:

(Identify whether this is a short, medium or long term goal.)

____

____

State your objective(s): ______________________________

____

____

____

Checklist:

Are the objectives

1. Specific? ______________________________
2. Reachable? ______________________________
3. Measurable? ______________________________
4. Prioritized? ______________________________

C. Identifying the Benefits

List the benefits of potential products, services, messages for your target group.

____

____

____

____

____

____

____

D. Choosing your activities

1. The message itself:

Is the purpose to inform, persuade, remind? ______________________________

____

Is the message complex or simple? ______________________________

____

What tone are you trying to establish? ______________________________

____

How sensitive is the issue? ______________________________

____

2. The target audience:

What are the capabilities and habits of your target audience? ____________________

____

____

What communication strategy provides the best fit? ______________________________

____

____

3. The budget and other resources:

How long will each community activity take to organize and complete? ____________

____

____

What resources are required to support the activities? ______________________________

____

E. Selecting your assessment techniques

1. Formative research:

What basic messages and products should receive formative evaluation before you proceed?

2. Process assessment:

Which of the following activities are relevant to your evaluation? ____________________

Radio/television time ____________________

Printed articles ____________________

Education materials ____________________

Speeches/presentations ____________________

Contacts with organizations ____________________

Organizations, business, and media which played a part ____________________

Response to the presentation ____________________

Inquiries ____________________

What other indicators should be added? ____________________

3. Outcome assessment:

What form will your outcome evaluation take? ____________________

A. Developing messages and materials

Creating a theme and logo

1. What is your communication theme line?

(Remember to keep it short, use an active verb and involve the audience)

____

____

____

2. How can you capture this in a logo? __________________________

____

____

____

Reviewing existing materials

1. Do the materials contain the right information? ____________________

2. Are the materials suitable/appropriate for your target audience? ______________

3. Will the materials be understood? __________________________

4. Are the materials available? __________________________

   (For free? Is there a cost? Can you afford it?) ____________________

5. How were they used? ______________________________

   Were they evaluated? ______________________________

   Were they effective?______________________________

   Can you see the results of the evaluation? ____________________

6. Can you have permission to use parts of or all materials? ________________

   Is referencing or recognition required? ______________________

A. Developing messages and materials (continued)

Creating and testing new messages

1. Make the message as clear as possible.

Checklist:
Use action verbs
Use examples
Avoid technical/scientific terms
Avoid jargon/acronyms
Avoid lengthy explanations
Use short sentences
Use simple words
Avoid 'blaming the victim'

2. Make the communications activities effective.

Checklist:
Be consistent
Stress main points first
Stress benefits
Get attention
Make it appealing

Producing effective print materials

1. Is the presentation easy to read?

Checklist:
Headlines
Subheadings
Print size
Bold print
Boxes
Bullet points
Has the material been proofread by someone else?

2. Are the graphics/artwork easy to understand?

Checklist:
Do you have permission to use existing material?
Do they compete with the printed material?
Are they easy to read?
Will photographs reproduce well?

3. Are the materials appropriate for specific groups?

Checklist:
Were the materials tested with a focus group?
Is the translation appropriate?
Are the illustrations appropriate?
Are endorsements from community leaders included?

B. Planning media activities

Advertising effectively

1. Newspaper Advertising:

Is the main message in the headline? ______________________________

Does your ad stand out? (use borders, photos, colour, etc.) ______________

Is the timing of the advertisement right? __________________________

____

2. Television Advertising:

How much time do you have (30 or 60 seconds)? _______________________

What is your key point? ______________________________________

Is the key point identified in the first 10 seconds? ____________________

How often is the key point repeated? _______________________________

Is the key point repeated at the end? _______________________________

Is the tone appropriate? _____________________________________

Is the approach right for the issue? ________________________________

Is the solution to the problem also presented? _______________________

Are the music and pictures appropriate? ____________________________

Has a contact number/address been given? ___________________________

3. Radio Advertising:

Are the announcer, music and sound effects memorable? __________________

Is the important information repeated more than once? __________________

Is this information repeated at the end of the announcement? _____________

Is the main message repeated more than once? ________________________

Is your message in the right style for the radio station? _________________

B. Planning media activities (continued)

Building good media relations

Media list:

(Include daily/weekly/community/cultural newspapers and magazines; organizational publications; television stations, cable companies; radio stations; etc.)

Name/Contacts	Mailing Address	Phone Number

C. Planning special events

Making the most of special events

Does your special event require a permit or license?
(Check with the local government) ____________________

Does your special event reinforce or demonstrate your message? ____________________

____

____

____

Is the timing right? What other events would you be competing with? ____________________

____

____

____

Is it fun? ____________________

____

____

C. Planning special events (continued)

Working with sponsors

Develop a corporate prospectus:

1. Target group ____

2. Program goal and objectives: ______________________________

3. Opportunities and benefits for the sponsor: ____________________

4. Details of the program activities: __________________________

5. Statement of what you want the sponsor to do: __________________

6. Statement of what you will give the sponsor in return: _____________

A. Reviewing your social marketing campaign

Issue: ______________________________

Goal: ______________________________

____

Objective(s):
1) ______________________________
2) ______________________________
3) ______________________________

Target audience:
Primary target group: ______________________________
Segments: 1) ______________________________
2) ______________________________
3) ______________________________

Secondary target group: ______________________________

Benefits:
(List by target segment)
1) ______________________________
2) ______________________________
3) ______________________________

Channels: (e.g., worksite, classroom, mass media, community event)

____

Activities: (List by target segment.)

____

Resources needed: (List people, time, and budget.)

____

Potential Problems: (Any roadblocks you can think of.)

____

Indicators of success:

____

Assessment methods:

____

B. Setting program timelines

Task	Person Responsible	Due Date	Resources

A. Assessing your program

The assessment checklist

1. Are inquiries and participation levels as high as you estimated? Are they higher than you expected? Why? ____________

2. Are you reaching your audience awareness targets? Are you exceeding them? Why?

3. Are you reaching or attracting new target audiences? Why? ____________

4. Have you access to communication channels you had not planned for? Why? And are you making the most of these new channels? ____________

5. Are your distribution points working as well as you planned? If not, why not? ____________

Writing the assessment report

1. Background on the objectives and purpose of the project and its communication program.

2. An outline of the project activities, noting which ones were measured.

3. Details on how you did evaluations (e.g., surveys, record-keeping).

4. Difficulties you had during the program, and how you overcame them, or any problems you had measuring results.

5. Actual results. Describe them, provide numbers of participants, articles etc.

6. Recommendations or things you see should be changed, as a result of your evaluation.

Promoting the Addiction Research Foundation's drug information telephone service to teens in Sudbury

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The opinions expressed in this article are those of the authors and do not necessarily reflect the views or policies of the Addiction Research Foundation or Pelmorex Broadcasting.

Abstract

In an attempt to overcome some of the barriers in getting accurate drug information to adolescents, a pilot study was conducted. A drug agency, in collaboration with a local radio station and schools, implemented a program which promoted a Drug and Alcohol Information Line telephone service to 13,600 students. The promotion utilized a multi-media mix of public service announcements, a radio contest and the distribution of print materials, all targeting twenty-one participating schools and their respective students. The evaluation for this intervention included the use of student and teacher questionnaires, a tally of materials distributed as well as the monitoring of calls to the Information Line. The majority of students surveyed responded that they were aware of the telephone information service from the promotion and that they would use the line as a source of information on drugs in the future. Teachers surveyed indicated support for the intervention and interest in participating in a similar promotion in the future.

Introduction

Drug education programs in the classroom continue to be the primary strategy utilized to prevent alcohol and drug use by adolescents. Even though Smart (1988) reports that Ontario students have been increasingly exposed to school based drug education programs, many students continue to be missed by such efforts. This may be attributed to a combination of factors. For example, drug education in high schools in Ontario, is basically limited to students who attend physical and health education classes which are optional after grade nine; other pressing health issues, like AIDS, displace or limit classroom time spent on drug education; and classroom teachers sometimes avoid teaching drug education as they feel inadequately informed about the topic area.

In examining methods to maximize the effectiveness of classroom instruction, researchers, like Goodstadt (1986) and Gliksman and Smythe (1990), have recommended that educators must take into consideration influences that operate outside of the classroom – such as the mass media. Flay (1986), while acknowledging that the media can promote anti-health messages, suggests that the use of media be linked to school based programming to either enhance classroom instruction or stimulate classroom activity.

The Addiction Research Foundation (ARF), a Canadian provincial drug agency, part of whose mandate is to provide up-to-date, accurate drug information to the citizens of Ontario, operates a toll free Drug and Alcohol Information Line (DAIL) telephone service. Callers to the service have the option of choosing from among 60 drug-related topics on prerecorded audio tapes. Each tape is three to five minutes in length and is available in French or English. When using this service the caller remains anonymous.

In order to promote awareness and use of this information service among adolescents, one of ARF's twenty-eight community service centres, located in Sudbury, Ontario, formed a partnership with the community's leading rock radio station (Sondages BBM Surveys Canada 1986) and twenty-one area schools to promote the Drug and Alcohol Information Line to students.

It was hypothesized that a marketing campaign utilizing public service radio announcements, a radio contest and the distribution of classroom materials to promote a respected drug agency's information service (in this case ARF's telephone line) would result in students perceiving the service as a trusted information source that they would use. Although use of the information line will likely result in knowledge gains with respect to alcohol and drugs, and may even result in attitude and behavior changes, these objectives are beyond the scope of the current study which focuses on utilization of a service and reactions to it. In addition, it was anticipated that school personnel, particularly teachers, would be supportive of such a promotion and would reinforce the use of the information service in their classrooms.

Method

Materials:

Radio PSAs – Pelmorex Broadcasting, the parent company of CHNO, produced 6 public service announcements (PSAs) written by ARF staff. Each PSA was designed to appeal to a certain segment of students and their perceived need to attain information on drugs (see

Table I

Market Segmentation I

Student Segment

Students With Homework Assignment

Student Characteristics

- assignment or report
- requires some research
- don't know where to go
- probably procrastinated or could be an achiever (want good grades, fear of failing)
- want fast easy access to information

Public Service Announcement

Bell rings, background classroom noise, Teacher says "Don't forget your health assignment on drugs is due tomorrow," Students groan. John: "oh geez, I forgot," Mike: "ooh," John: "can I borrow yours?" Mike: "I haven't done mine either – what are we going to do?" John: "hey, what about that poster in class – isn't there something on there about drugs?" Mike: "yeah, its a toll-free number, let's call, got a quarter?" Sound of a quarter in pay phone. Mike: "what's the number?" John: "1-800-387-2916." Sound of operator: "ARF's Drug and Alcohol Information Line." Tag: "Ask for tape #R309 – it's for you from CHNO Rock 55."

Table II

Market Segmentation II

Student Segment

Students being pressured by peers to use drugs

Student Characteristics

- unsure, contemplative, feeling pressured and confused
- value conflict (home vs. peers)
- need for no cost confidential information
- need unbiased factual information
- grade 7 and 8 – pressure to use alcohol, tobacco and marijuana
- grade 9+ – pressure to use alcohol and marijuana

Public Service Announcement

Slam of locker door. Julie: "wait up – I'll walk you home – are you going to Cathy's pajama party Friday night?" Tara: "I'm not sure." Julie: "Cathy's going to sneak some of her dad's booze and Sharon's going to bring some of her mom's smokes." Tara: "I don't know, if my mom finds out, I'd get killed." Julie: "aw come on, we'll have a great time and if you don't go, everyone will call you a suck." Tara: "doesn't smoking cause cancer or something?" Julie: "no, there's nothing wrong with it." Tara: "tell you what, I'll call ARF's information line – what's the number of that sticker?" Julie: "1-800-387-2916." Tag: "Ask for tape #R218 – free alcohol and drug information – from CHNO."

Table III

Market Segmentation III

Student Segment

Non-using students whose friends use drugs.

Student Characteristics

- caring and concerned friend
- contemplating confrontation or has already mentioned concern to friend
- helper/friend role
- fear of loosing friendship
- wants to reinforce position with factual information
- need for confidentiality

Public Service Announcement

Phone rings. Jen: "got it – Hello." Karen: "Hi Jen, its Karen, are you free this weekend or are you going out with David?" Jen: "well, I'd like to but he's been acting so strange lately." Karen: "is he back to using drugs?" Jen: "I'm not sure if its drugs or what is going on, but I really get scared when we go out." Karen: "what are you going to do?" Jen: "I don't know, I want to talk to him but I'm not sure what to say." Karen: "hey, why don't you try ARF's information line – don't they have tapes on drug effects?" Jen: "that's right, do you have the number?" Karen: "yeah, its on my bookmark, 1-800-387-2916." Tag: "Ask for tape #R302 – it's for you from CHNO."

Table IV

Market Segmentation IV

Student Segment

Students who are new drug users – beginning experimenter

Student Characteristics

- using drugs, occasional/infrequent
- unsure but excited
- frightened of possible bad effects, legal consequences, parents, etc.
- wants to belong with using group
- might be seeking confidential, unbiased information source

Public Service Announcement

Mom yells: "Wayne, time to get up for school!" Wayne (talking to himself): "Boy, what a party last night, did I ever get blitzed, geez, my lst time and I don't even remember how I got home from Jim's. My God, I wonder what my parents think. Ellen, what does Ellen think? She must think I'm a real jerk. Was I ever sick. What did I take. It sure affected me. I guess I better find out, hm, aw, I got a number here somewhere, oh yeah, its on the ARF bookmark I got at school. Let's see 1-800-387-2916." Operator's voice: "ARF's Drug and Alcohol Information Line." Tag: "Ask for tape #R102, it's for you from CHNO."

Table V

Market Segmentation V

Student Segment

Students using drugs on a regular basis

Student Characteristics

- likes drugs, takes risks, "no one will tell me what to do"
- may be pushing drugs
- denial, mixing drugs
- some consequences experienced like loss of friends, low grades, fights with parents, etc.
- receiving criticism from school, home, friends
- may want to check information out

Public Service Announcement

Party background, clinking glasses, laughter. Chris: "Hey, watch it, you're spilling that stuff all over me." Jake: "Pretty good party." Chris: "yeah its not bad, but I'm not into booze. I'd rather take these, they really mellow you out. Here, try a couple." Jake: "Geez, I don't know, I heard that's dangerous stuff when you mix it with booze – I'd rather check it out first." Chris: "Yeah, I know what you're going to do. I'll bet you're going to call ARF's Drug and Alcohol Information Line right?" Other voice: "Right." Tag: "Ask for tape #R313 – it's for you – call 1-800-387-2916 from CHNO Rock radio."

Table VI

Market Segmentation VI

Student Segment

Students who are not using drugs

Student Characteristics

- does okay in school and at home
- life is good to great
- likes self, has friends
- involved in extra curricular activities like sports, clubs, part time job

Public Service Announcement

Big Brother (B.B.): "How's your homework going?" Little Brother (L.B.): "Aw, not bad, I need some help with this math question – at least big brothers are good for something." B.B: "Very funny." L.B.: "Nick, can I ask you a question? Do you know anything about drugs?" B.B.: "Not an awful lot, but we sure have a few airheads around. I haven't got time for them anyway. What do you want to know?" L.B.: "Well, Jeff and Josh are using them and I don't plan to, but I would like to find out more about them." B.B.: "Hey, I got an idea, check out the sticker on my binder, there's a number for drug information on it." L.B.: "Oh yeah, here it is." B.B. "Okay, what's the number?" L.B.: "1-800-387-2916." Tag: "Try it, it's for you, ARF's Drug and Alcohol Information Line from CHNO."

Tables I-VI). Messages were targeted at students who: had a homework assignment in health education; were concerned about a friend's drug use; felt pressured to use drugs; were using and mixing drugs; were considering drug experimentation; or simply wanted information. In addition to introducing the radio listener to the Drug and Alcohol Information Line Service and its telephone number, each PSA drew attention to the complementary materials distributed to students in the classroom. Each spot concluded with the general statement: "Ask for tape number (ie: 103) it's for you."

Radio Contest Prize – A clock/radio telephone combination unit and the installation of a direct dial telephone line to the ARF information service for a one year period were purchased by ARF as prizes for a phone-in radio contest conducted by the radio station. The intent of the contest was to draw attention to the ARF information service and its telephone number. The combination unit was an incentive offered to the winning student, while his/her high school received the direct dial telephone hook-up.

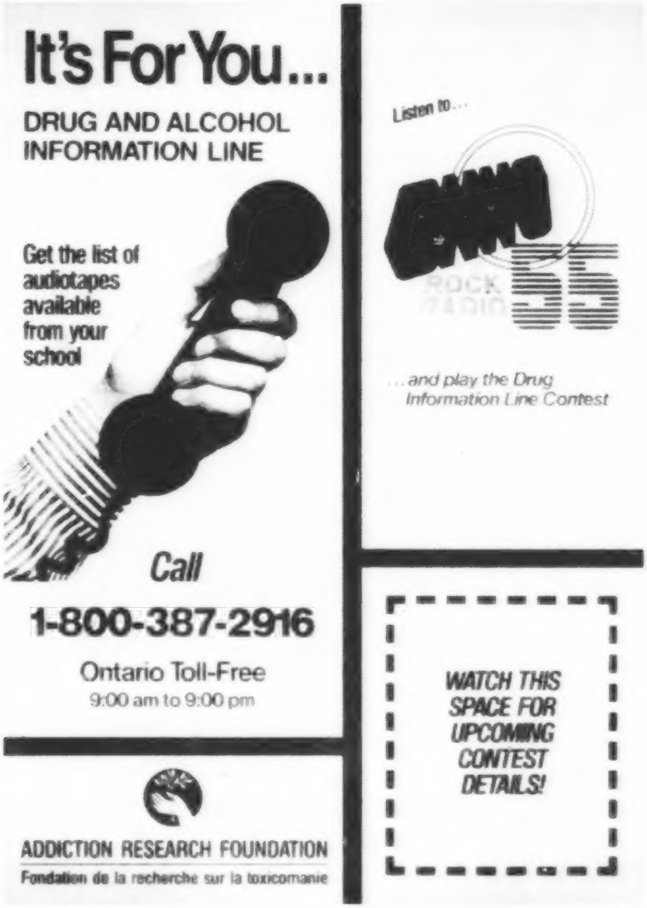
School Based Materials – Posters (see Figure 1) were produced for placement in all classrooms within a school, while bookmarks, flyers and stickers were developed for distribution to every student.

All print items, available in French and English, included two colors on a white background, and identified the ARF Drug and Alcohol Information Line, its toll-free telephone number, and time of operation. All materials carried the promotional theme of "IT'S FOR YOU!" The posters also identified the collaborating radio station and provided details for the radio contest. The flyer presented a menu of drug topics available through the information line's prerecorded tapes. Each topic listed on the flyer was specially coded to identify calls from this promotion. For example, "Hazards of Using a Mix of Drugs" was coded R313 rather than simply 313 which represented the provincially advertised tape number.

Procedure:

Over a three and one half month period, from mid-March 1988 to June 1988 inclusive, the telephone information service was promoted to students through a combination of channels. The six PSAs were aired on CHNO on a rotating basis, at least three times per day between 3:30 p.m. (after school) and midnight. Concurrently, school principals, teachers and student government representatives distributed flyers, bookmarks and stickers to each student in grades 7 through 13 and placed promotional posters in all classroom areas of the twenty-one participating schools. A tally of the number of print items requested by each school involved with the promotion was recorded by the first author. During the last month of the promotion, the radio station conducted a phone-in radio contest each evening to highlight the information line's telephone number. Students successfully identifying the telephone number had their names entered into a draw for the prizes outlined earlier.

Figure 1



It's For You...

DRUG AND ALCOHOL
INFORMATION LINE

Get the list of
audiotapes
available
from your
school

Call

1-800-387-2916

Ontario Toll-Free
9:00 am to 9:00 pm

ADDICTION RESEARCH FOUNDATION
Fondation de la recherche sur la toxicomanie

Listen to...

ROCK RADIO 55

...and play the Drug
Information Line Contest

WATCH THIS
SPACE FOR
UPCOMING
CONTEST
DETAILS!

To determine use of the Drug and Alcohol Information Line as a result of this promotion, several measures were utilized. ARF information line operators regularly record each tape requested, by noting its corresponding number on a standard form so that consumer demand and preference can be monitored. The form used had to be modified to accommodate and record the special codes which signified calls generated by the Sudbury promotion. As a result, the recorder was able to distinguish other calls from Sudbury calls even though they used the same provincial toll-free telephone number.

The evaluation focused on student perceptions of the program and their use of the DAIL, and involved sampling random classrooms of students and asking the students to complete an anonymous questionnaire within one month of the completion of the promotion. Classrooms were sequentially numbered and a random number table was used to determine which classrooms would be selected. Students were asked about their awareness of the Drug and Alcohol Information Line Service, the promotional print materials, the radio PSAs, as well as their use of the telephone information service and their future intention to call. Again, the evaluation did not focus on changes in information about drugs, or changes in attitudes or behaviors with respect to drugs because these were beyond the objectives of the program.

In addition, teachers from all participating schools were asked to complete a different questionnaire on the promotion which was distributed to them by their principal. There was no way however of determining how many actually received a questionnaire. Teachers were asked about their awareness of the information line promotion, use of the promotional materials in the classroom and interest in participating in a similar intervention in the future. Teachers responding to the survey were asked to return the completed questionnaire in a sealed envelope to the school office for forwarding to the first author, thus maintaining anonymity.

Subjects:

Approximately 13,600 students, between the ages of twelve and eighteen were exposed to some or all aspects of the intervention promoting the use of ARF's Drug and Alcohol Information Line as a drug information source. This involved twenty-one of twenty-two senior elementary (grades 7 and 8) and secondary schools (grades 9 through 13) operated by the Sudbury Board of Education and the Sudbury Roman Catholic Separate School Board.

A total of 618 questionnaires were distributed to students from 27 classrooms. All students returned a completed questionnaire. Four hundred and six were from English language schools while 212 were from French language schools. Of the total, 43% of the respondents were male and 57% were female. The average age of the respondents was 16.5 years.

A total of 231 teachers completed a questionnaire. This represents approximately 20% of the total number of teaching staff for participating schools.

Results and discussion

Student responses:

Of the total calls received from across the province of Ontario at ARF's Information Line Service during the month of April 1988, approximately 25% or 560 of the callers identified the special code from the Sudbury promotion. The tape requested most often by students phoning in during April was "Alcohol and Drug Use Among High School Students."

In the month of May however, the number of calls to the line dropped to 140. In June, the ARF Information Line was computerized to an automated answering service which meant that calls were no longer recorded manually. Unfortunately, operational difficulties with the automated system resulted in the specially coded calls not being recorded during the last month of the promotion – the month of the phone-in radio contest.

While the radio disc jockey did report that the station telephone lines were jammed during the contest promotion, without the additional data that was lost due to the technical problems described above, the results are tentative and the authors can only speculate whether this special promotion would have generated an increase in the number of calls to the information line over the previous month's decline. When survey respondents were asked if they had participated in the radio contest, 7.4% of the sample indicated doing so. If we extrapolate this to the entire target population of 13,600 students, this means that over 1,000 students could have participated in this contest. Continued problems with the new system resulted in no further data being collected, even though the intent was to monitor calls for a six month period.

Based on the student questionnaires, the primary reasons reported by students for using DAIL were curiosity about the telephone information service and a need for information. In addition, 67.8% of the students reported awareness of ARF's Drug and Alcohol Information Line and 80.9% of those who were aware of the promotion identified the poster as the way they heard about the line.

Other promotional measures ranked in the following order: 70.4% heard the ads on the radio, 57.5% remembered the bookmark and 57.3% the sticker, 49.9% heard the radio contest, 37% remembered a flyer and 14.8% discussed the promotion in class. These numbers exceed 100% because students indicated hearing about the promotion from a number of sources.

Although there was no way of ensuring the accuracy of the numbers of print items reportedly distributed by the twenty-one participating schools (as the dissemination of materials was left in the hands of individual principals), it is estimated that a total of 13,612 students each received a bookmark and flyer on the Information Line. Because several secondary schools feared student misuse of the stickers (affixing them to school property), they asked that stickers not be distributed at their schools. Thus, only 11,912 students received a sticker. A total of 720 posters were posted. A check conducted during the student survey, indicated that the majority of classrooms visited did have a poster. Other materials, particularly bookmarks and stickers were also quite visible during these school visits.

An interesting difference between English and French language student respondents regarding awareness of the radio PSAs appeared. Even though these PSAs were all in English, 78.9% of French language school student respondents reported being aware of the service from the radio promotion as compared to 67% of English language school respondents. While it is not surprising that French language students listen to the English language rock radio station (as the French language station uses a more middle of the road format), the difference between language groups is difficult to explain.

Even though 67.8% of all respondents reported that they were aware of the information line, only 7.4% reported using it. This may have two possible explanations: that this service is only used when needed; and/or that too few students received the menu of topics to trigger interest in calling. This latter explanation is reinforced because only 37.0% recall receiving the flyer identifying topics. However, literally each student who reported having used the line said they would recommend the Information Line to their friends.

Perhaps one of the most significant responses, was to the question of where respondents would go if they needed information in the future (see table VII).

Table VII

Student Preferred Information Sources on Alcohol and Drugs

Source	English School *Respondents* %	French School *Respondents* %
Family Doctor	38.7	37.3
Police	12.8	17.5
Teacher	17.0	17.0
Parents	37.9	45.3
Friends	52.9	58.0
ARF's Drug and Alcohol Information Line	67.5	65.1
Other	9.4	11.8

According to respondents, the Information Line, would in future, be used more frequently than any other source of information, with friends now significantly behind in second place. This result is particularly important as authors such as Smart and Fejer (1974) report that most students rely on their friends for drug information even though they are not always a reliable accurate source. One other point which may be of interest is that the French language school respondents stated they would go to their parents for information more so than English language students.

Teacher responses:

A total of 231 teachers completed the questionnaire, 58% of whom were responsible for a homeroom. Of those who were homeroom teachers, 58% reported distributing stickers, 59% flyers and 56% bookmarks. Of these same respondents, 63% indicated that they had a poster up in their classroom from April through June, although only 38% reported adding a sticker to the poster in June announcing the radio contest. This may partially account for the lower than expected number of students indicating that they had participated in the radio contest.

Seventeen percent of the teachers surveyed stated that students did explicitly ask them questions about the materials that were part of the promotion. This number is interesting in that it corresponds exactly to the number of French and English student respondents who said they would use teachers as a source of information. In addition to these direct inquiries, 26% of the teachers surveyed also reported overhearing students discussing the promotional materials that were distributed and/or up in the classroom. These data suggest that the promotion generated interest in the topic among students.

Few teacher respondents (8%) incorporated the promotional material directly into a drug education lesson. Many of those who did not use the materials reported that they were not responsible for drug education. Most teacher respondents (86%) also reported having no problem with the materials, and when asked about recommending the promotion again in their school, 78% stated that they would – indicating continued support for this school/ community intervention.

Teachers were also asked at the end of the survey to provide any additional comments about the promotion. One of the interesting comments which appeared repeatedly was that although they support such drug education efforts, and put up posters in their homerooms, they knew little about the actual promotion in their own school from their principal. If this intervention was to be replicated in future, additional clarification to help teachers understand the opportunity for classroom involvement would be recommended.

Conclusion

Because of the technical difficulties described above, the evaluation was not as extensive or definitive as originally planned. However, the results, while tentative, are still encouraging from several perspectives — not the least of which is the addition of an example of the important relationship between the use of media in the community and the classroom, in a literature that is rather sparse in this area. As Flay (1986, p.405) advocates "the dearth of data suggests that it is important to evaluate every attempt at using the mass media to disseminate effective programming." Consistent with Flay's comments, the promotion used in this study identifies the unique interplay between media and classroom education and illustrates how both channels can be used to complement and reinforce each other to create a more effective program base.

Secondly, in reference to questions Goodstadt (1986) and Gliksman and Smythe (1990) raise about the effectiveness of independent classroom instruction, the results reinforce the position that other influences outside of the classroom do exist and can interact with the classroom to complement school based programming. This intervention illustrates that the use of social marketing techniques to design separate messages for different student segments (rather than viewing students in the classroom as a homogeneous group) has tremendous promise in maximizing school based programming efforts. Social marketing in this context could be viewed as a new tool for school programmers to use to make their messages and interventions more effective.

Lastly, as an intervention which integrates media and school efforts, it appears to have worked. From responses to the student questionnaire utilized in this pilot study, student respondents were aware of the information service and indicated their intention to use the service when in need of drug information. Not only did respondents indicate an intent to use, but the promotion elevated the information line to the most frequently reported service respondents would use, surpassing the traditional reliance on friends for drug information. By doing this, one can speculate that the promotion made students feel that the information line is a trusted, accurate source for drug information.

Acknowledgements

The authors would like to acknowledge the following for their contributions:

Tom Bertrim, principal of Lively Secondary School and his students for reviewing the PSA scripts and assisting with production,

Dave Britnell, Neil Ray and Donald Murray retired from the Addiction Research Foundation's audio visual and print design services for their technical assistance,

Angele Vis, Joan Leonard, and Pauline Clarke for typing this manuscript,

Karen Roche, former Production Manager for CHNO for assisting with the production of the radio PSAs.

All participating principals, teaching staff and students from the Sudbury Board of Education and the Sudbury District Roman Catholic Separate School Board, for without their involvement, this community-school intervention could not have occurred.

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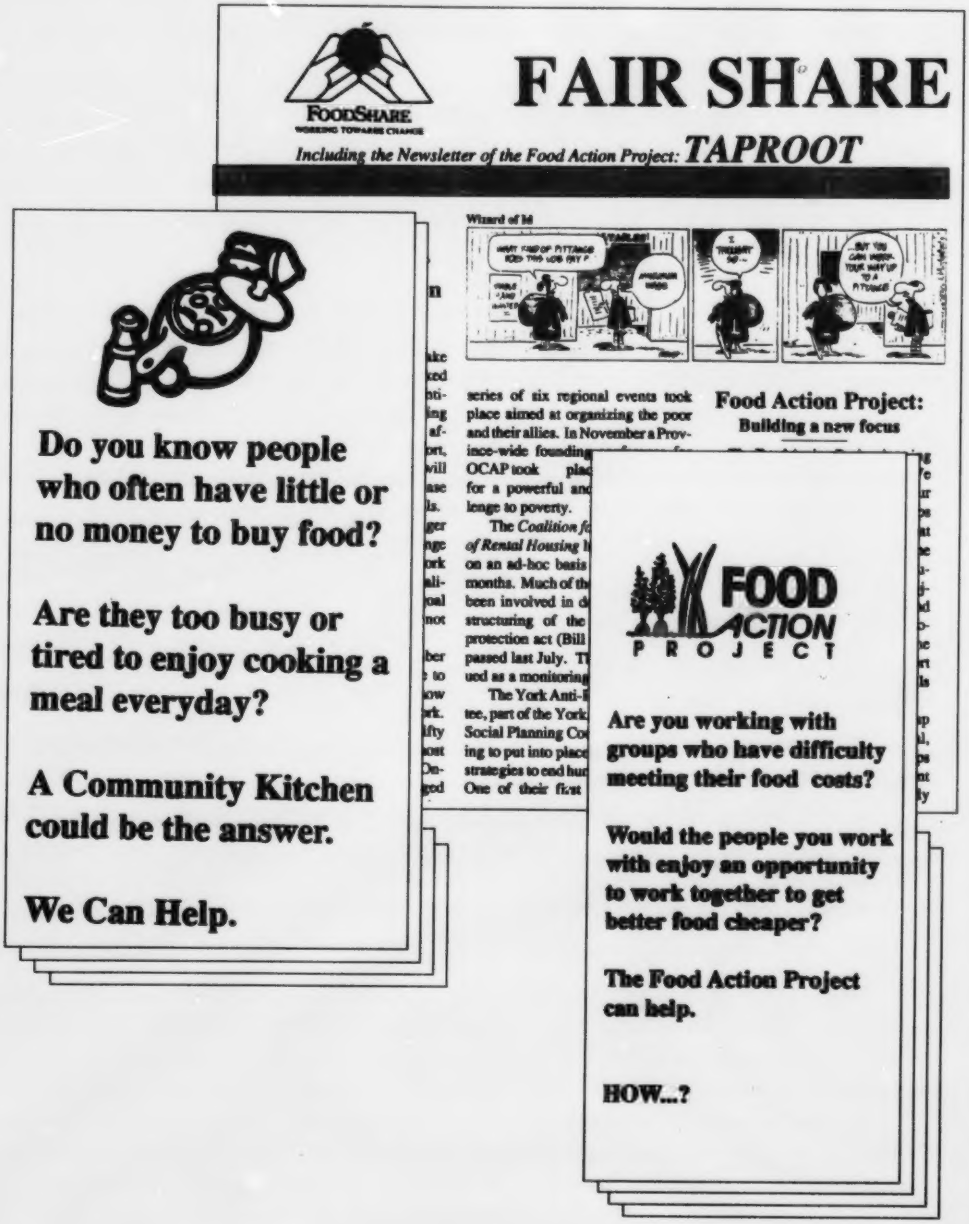
FoodShare Metro Toronto – Food Action Project


FOODSHARE
WORKING TOWARDS CHANGE
Wizard of Id
WHAT KIND OF PITTANCE DOES THIS JOB PAY?
MINIMUM WAGE
I THOUGHT SO--
BUT YOU CAN WORK YOUR WAY UP TO A PITTANCE
FOOD ACTION PROJECT

FAIR SHARE

Including the Newsletter of the Food Action Project: ***TAPROOT***

series of six regional events took place aimed at organizing the poor and their allies. In November a Province-wide founding
OCAP took plac
for a powerful and
lenge to poverty.

The *Coalition fo*
of Rental Housing h
on an ad-hoc basis
months. Much of the
been involved in d
structuring of the
protection act (Bill
passed last July. T
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The York Anti-
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Social Planning Co
ing to put into place
strategies to end hun
One of their first

Food Action Project:

Building a new focus

Do you know people who often have little or no money to buy food?

Are they too busy or tired to enjoy cooking a meal everyday?

A Community Kitchen could be the answer.

We Can Help.

Are you working with groups who have difficulty meeting their food costs?

Would the people you work with enjoy an opportunity to work together to get better food cheaper?

The Food Action Project can help.

HOW...?

1. SMOG readability index

The SMOG Readability Formula

There is a clear relationship between literacy and health. People with low literacy skills are likely to be in worse health than people who are more literate.

The SMOG Readability formula can help you assess how easy or how difficult your materials will be for your target audience to read and understand. It is a technique for analyzing written materials and estimating the reading grade level needed to understand the text.

How to use the SMOG test

1. Choose ten consecutive sentences from near the beginning, middle and end of your text for a total of 30 sentences.
2. Within this sample circle all polysyllabic words, that is words which contain three or more syllables, and count them. Include repetitions of the same word and proper nouns. Abbreviations and numbers should be pronounced to determine if they are polysyllabic. Hyphenated words are considered as one word.
3. Check your polysyllabic word count against the SMOG conversion table below.

SMOG Conversion Table*

Total Polysyllabic Word Count	Approximate Grade Level (+/- 1.5 Grades)	Readability
0 – 2	4	Low literacy
3 – 6	5	
7 – 12	6	Very easy
13 – 20	7	
21 – 30	8	Easy
31 – 42	9	Average
43 – 56	10	
57 – 72	11	A bit difficult
73 – 90	12	
91 – 110	13	
111 – 132	14	Difficult
133 – 156	15	
157 – 182	16	
183 – 210	17	
211 – 240	18	

- *Developed by: Howard C. McGraw, Office of Education Research, Baltimore County Schools, Towson, Maryland.*

2. Focus group guide

Focus groups are ideal for testing rough drafts of materials. They allow you to probe what individuals think about the issue in general terms before asking their opinions on materials. As the talk is usually informal, it allows you to pick up on the language the target audience uses in discussing the issue, and it can provide new directions.

Care must be taken in interpreting focus groups results. The purpose of organizing focus groups is to give you comments and opinions. These results may guide – but should not dictate – the development of your materials and approaches.

Focus groups are best conducted by professional moderators who have special skills and techniques which allow them to draw useful responses from the participants. However, if you decide to go ahead with an informal focus group, you may find the following information useful.

You will need

1. A large comfortable room, in which 10 people can talk naturally and hear each other. Church or school meeting rooms, office boardrooms can be used.
2. Eight to 10 people who are representative of the target audience.
3. One or two hours for each session.
4. A skilled moderator who can keep the discussion on track.

It is a good idea to offer the participants some refreshments, or even a small payment or gift. This will put them in a positive mood, make them feel their opinion is valued and keep them from resenting the time spent in the group.

Other ways to encourage participation

- Schedule the test at a convenient time for the group (e.g., at a lunch break or just after work).
- Choose a convenient location – one that is easy to get to by public transportation.
- Offer transportation and babysitting or day-care service during the time of the group.

Getting a good response

The focus group exercise will prove to be more valuable if you recruit respondents with these points in mind.

1. The respondents should be typical of the intended target audience.
2. The target audience may have sub-groups you should be sensitive to, especially if the issue itself is sensitive. Teenagers will not talk freely if people their parents' age are in the room. Teenage boys will talk more naturally if teenage girls are not in the room. And minority groups may feel threatened if out-numbered by the majority. Consider whether to segregate the groups by age, sex, race or whatever, before recruiting.
3. Recruit respondents one to three weeks in advance of the session.
4. Recruit using the telephone directory. Ask people questions to determine if they are in your target audience. Or recruit from members of a relevant organization, a school, a

place of employment, or any other source. Respondents don't have to be chosen at random because this kind of research is not intended to be statistically representative.

5. *But* (and this applies to the above) respondents should not know each other. Friends respond differently under peer pressure than they do alone.
6. Respondents should not know what the topic will be before the session. You want them to give their opinions spontaneously.
7. Try to recruit relative newcomers to the focus group process. Again this will encourage spontaneity and discourage "know-it-alls." For the same reason, you don't want health professionals or professional market researchers or marketing people. If it is important for you to test concepts among health professionals, set up a separate focus group for them.
8. There are no rules as to how many focus group sessions you need. Two seems to be the minimum. If after two, the target groups seem to be reacting similarly, you may decide not to go on. However, if they are reacting differently, you may need more groups to get a firm direction.

Characteristics of a good moderator

1. The moderator does not have to be an expert on the issue being discussed.
2. The ability to build a rapport and trust with the respondents is key.
3. The moderator should probe the issue without reacting to or influencing the respondents.
4. The moderator should stress that he or she is not an expert on the subject.
5. An outline of how the discussion should proceed should be prepared, and the moderator should rehearse any specific points you want discussed.
6. The moderator should lead the group, not the other way around. He or she should be able to control opinionated respondents who may try to bully the rest, and bring out responses from those who are reluctant to voice an opinion.
7. It would be useful for the moderator to take notes and to tape record or videotape the session, to check back on what was actually said. It's also a good idea to have someone else listen in and take notes, either behind a one-way mirror or in an adjoining room. This is useful in case there is a disagreement on the meaning of a comment.
8. Experienced professional moderators can be hired freelance, without hiring the services of a research house. If you are going to be doing more programs, you might consider hiring one to give a workshop on the techniques to you and other staff. Local ad agencies and local colleges offering communications courses can also help in recruiting a moderator.

Focus group format

There are no hard and fast rules as to how a focus group session should go. Most successful sessions follow the pattern outlined below.

Step 1. Moderator introduces himself/herself. Thanks the members for participating.

Explains the purpose of the focus group. Stresses that there are no right or wrong answers, that all comments are welcome, and that all comments are confidential and for assessment purposes only.

Step 2. Moderator encourages a discussion of general health issues by asking questions such as – Is health something you generally think about? If not, why not? How about the health of your family? Which aspects of health do you think about most often – Disease? Nutrition? Smoking or drinking? Fitness?

Step 3. Moderator encourages a discussion of a specific health issue by asking such questions as – How much would you say you know about XXX issue? Is there anything you would particularly want to know about it? Have you or any member of your family been affected by it?

Step 4. Moderator presents rough drafts of the materials to be tested, giving the participants enough details to be able to visualize the final product, i.e. the size and colours to be used on a poster, the music and special effects to be incorporated in a radio or tv public service announcement.

Step 5. Moderator encourages a discussion of the rough drafts by asking such questions as – In your own words, what would you say is the main message in the materials? Was there any information that was new to you? Is there anything more you would like to know? Was there anything that you particularly liked in the materials? Disliked? Was the material interesting? Easy to understand?

Step 6. Moderator winds down the discussion by asking participants if they have any final comments or questions, then reiterates that their contribution to the project has been valuable and thanks them for coming.

3. Questionnaire format

Surveys, whether by telephone or central location intercept, can provide useful quantitative information to help you develop and/or refine your social marketing campaign.

To achieve the most accurate and reliable information, questionnaires are best designed and the results interpreted by experts. The wording of a question, for example, can have a tremendous influence on how people respond. A market research firm or consultant can help you develop and implement a reliable questionnaire to meet the unique needs of your campaign.

However, if you have decided to design and conduct your own survey, here is a general format you may want to follow.

Introduction

Hello, my name is ______________. I am with (________________). We are doing a brief
organization
survey

concerning (_________). Would you be willing to answer a few questions?
issue

Screening

What is your age/sex/level of education, etc.?
(This is to identify whether the respondent is in your target group. If not, thank and terminate.)

Questions

1. How much would you say you know about (_________)?
issue
☐ A little ☐ Some ☐ A lot
2. Have you or any member of your family ever been affected by (_________)?
issue
3. Are you now or have you ever been a member of an organization concerned about (________)?
issue
4. What impact on your life do you think (_________) has?
issue
☐ A lot ☐ Some ☐ Very little
5. What level of priority do you think society should place on resolving (_________)?
issue
☐ High ☐ Medium ☐ Low
6. If you wanted to find out more about (_________), do you know where you could get reliable information?
issue
☐ Yes ☐ No
7. Are there any comments you would like to make about (_________)?
issue

Closing

Thank you very much for helping us with our survey.

Contact your local resource centres first

- District health council
- Public health unit
- Community information centre
- Addiction Research Foundation

Check the government listings and the white pages of your telephone book for these numbers.

Ontario Ministry of Health, Health Promotion Branch

We provide a number of resources for the Healthy Lifestyles Promotion Program.

Promotional materials. Media Kits to help link local activities to the province-wide program. This includes a listing of TV and radio stations, sample news releases, radio scripts and ad matts. These kits are not available for distribution, but they can be viewed at your local public health unit. As a follow-up to this kit, the Health Promotion Branch has developed Media Resource Materials. This package contains transcribed interviews, background information and sample articles related to smoking, alcohol and nutrition for use with local media.

Resource manuals. In addition to this social marketing guide, there is a "Community Mobilization Manual" which outlines a practical framework for planning and implementing activities focused on health promotion, smoking, alcohol and healthy eating.

Skills development. Training events aimed at teaching people how to stimulate local health promotion activities focusing on models for smoking, alcohol and nutrition programs and policies.

Seed/project grants. Funding support for local healthy lifestyle activities and initiatives are available through the existing Health Promotion Grants program. Also available is a guide which outlines "How To Write An Effective Proposal" for the Health Promotion Grants program. Contact your local district health council or the Health Promotion Branch for information.

Ongoing information and referral:

Health Promotion Branch
Ontario Ministry of Health
700 Bay St., Suite 1401
Toronto, Ont. M5G 1Z6
Tel: (416) 965-9203 Fax: (416) 324-7179
(416) 324-7175

Ontario Ministry of Health, Public Health Branch

This branch can provide information on the mandatory public health programs and services provided by the 42 boards of health throughout Ontario. There are programs on nutrition promotion, physical activity promotion, tobacco use prevention, and substance abuse prevention. Staff of the local boards of health co-operate with other groups and organizations to promote healthy lifestyles for people in their health unit area.

Public Health Branch
Ontario Ministry of Health
15 Overlea Boulevard
Toronto, Ont. M4H 1A9
Tel: (416) 963-2229   Fax: (416) 965-7323

Ontario Ministry of Health, Health Information Centre

The Health Information Centre provides information on the programs, services and activities of the ministry through the distribution of pamphlets, posters, information packages and educational materials on a variety of health topics, and responds to questions about health care and the health care system.

Health Information Centre
Communications and Information Branch
Ontario Ministry of Health
9th Floor, Hepburn Block
80 Grosvenor Street
Toronto, Ont. M7A 1S2
Tel: (416) 327-4327   Fax: (416) 963-3496
Toll-free number: 1-800-268-1153 (in Ontario only)

Ontario Prevention Clearinghouse

This province-wide program provides:

- Information, support and advice for community groups and individuals working in the areas of health promotion and primary prevention.
- Information about health promotion and primary prevention programs, including projects funded by the Ministry of Health, Ministry of Community and Social Services, Provincial Anti-Drug Secretariat and Health and Welfare Canada.
- Information about health promotion and primary prevention resources and strategies, including social marketing, program evaluation approaches, funding sources, and outreach activities.
- Bilingual newsletter

Executive Director
Ontario Prevention Clearinghouse
984 Bay Street, 6th Floor
Toronto, Ont. M5S 2S5
Tel: (416) 928-1838 or Toll-free 1-800-263-2846
Fax: (416) 928-5975

Ontario Public Health Association

This organization provides:

- 3-day annual conference (November) and 1-day skill development workshops throughout Ontario.
- Information and project activities on: literacy and health; environmental health; strengthening community health; condom use strategies; health promotion
- Annual health promotion summer school
- Referral to Association expertise/experience and local members of the Association
- Association policies with respect to: healthy public policy, as well as alcohol, tobacco, nutrition and other major determinants of health.
- Information about health promotion resources and strategies, including program evaluation approaches, funding sources, outreach activities.
- Health promotion division within the Association is a focus for networking, skill development and advocacy.
- Monthly newsletter (OPHA News) and quarterly journal (HealthBeat)

Executive Director
Ontario Public Health Association
468 Queen Street East, Suite 202
Toronto, Ont. M5A 1T7
Tel: (416) 367-3313 Fax: (416) 367-2844

Health and Welfare Canada, Health Promotion Directorate

Education materials for health issues published by Health and Welfare are available through this Directorate. The Directorate also administers the Health Promotion Contribution Fund. They can provide information on the types of projects which qualify for funding, as well as guidelines for submitting a proposal. Contact the regional office.

Health Promotion Directorate
Ontario Regional Office
2221 Yonge Street, Suite 605
Toronto, Ont. M4S 2B4
Tel: (416) 973-6484 Fax: (416) 973-6409

The Health Promotion Studies Unit of this Directorate can provide information from national health surveys. They will, for example, use existing data to conduct analyses of smoking rates for specific age/sex groupings among Ontario residents. Contact the Health Promotion Studies Unit.

Chief
Health Promotion Studies Unit
Health and Welfare Canada
Jeanne Mance Building, Tunney's Pasture
Ottawa, Ont. K1A 1B4
Tel: (613) 954-8835 Fax: (613) 990-7097

Special Units within the Directorate will provide information on:

- Marketing and communications
- Education and training
- Health promotion in the workplace

Chief, Education and Training Unit
Tel: (613) 954-8862 Fax: (613) 990-7097

Chief, Health Promotion in the Workplace Unit
Tel: (613) 954-8856 Fax: (613) 990-7097

Director of Program Promotion Division
Tel: (613) 954-8839 Fax: (613) 990-7097

PARTICIPaction

PARTICIPaction is a private, non-profit company which produces educational and motivational materials on physical activity, nutrition and other components of a healthy lifestyle. There is a cost for those materials.

PARTICIPaction
40 Dundas St. West, Suite 220
Toronto, Ont. M5G 2C2
Tel: (416) 977-7467 Fax: (416) 977-9953

Addiction Research Foundation of Ontario

The Addiction Research Foundation (ARF) conducts research into the causes, treatment and prevention of alcohol and other drug problems. The Foundation's School for Addiction Studies offers educational courses throughout the year, and the library has an extensive collection of monographs, reprints and audiovisual material.

ARF develops programs, products and services for use by Ontario communities. The Foundation operates 27 offices throughout the province and offers free educational materials and consultation to Ontario residents.

Drug and Alcohol Information Line (416) 595-6111
Toll-free in Ontario (800) 387-2916
ARF Public Affairs (416) 595-6054
Library (416) 595-6144
School for Addiction Studies (416) 964-9311

Regional Offices
Metro Toronto (416) 595-6126
South West (Chatham) (519) 354-3080
Central South (St. Catharines) (416) 988-1271
Central West (Mississauga) (416) 270-1178
Central East (Kingston) (613) 546-4266
Eastern (Ottawa/Carleton) (613) 728-4104
North East (Sudbury) (705) 675-1181
North West (Thunder Bay) (807) 622-0607

Ontario Ministry of Tourism and Recreation

The Ministry supports initiatives which promote active living through recreation.

Recreation Programs Branch
77 Bloor St. West
8th Floor
Toronto, Ont. M7A 2R9
(416) 965-6311 Fax: (416) 965-0994

Evaluation of This Guide

To help us improve and expand our resources for communities, we would appreciate your comments on this guide to social marketing.

Please complete this form and send it to:

Healthy Lifestyles Promotion Program
Health Promotion Branch
Ontario Ministry of Health
700 Bay St., Suite 1401
Toronto, Ont. M5G 1Z6

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1. Where are you from in Ontario? ____________________
2. What is your "community"? ____________________
3. How did you find out about this guide? ____________________
4. How did you obtain this guide? ____________________
5. What other help do you feel you need in addition to this guide (e.g., workshops, guide for evaluation, program materials, funding)? ____________________

Please check the sections of the guide you use:

☐ Entire guide
☐ Introduction
☐ Getting started
☐ Planning and developing your strategy
☐ Getting your message out
☐ Writing your communications plan
☐ Implementing your plan
☐ Measuring results
☐ Appendix I
☐ Appendix II
☐ Appendix III
☐ Appendix IV
☐ Appendix V

Please fill in the chart below for the sections of the guide you used.

Sections	STEP 1 Getting Started	STEP 2 Strategy	STEP 3 Materials & Activities	STEP 4 Communications Plan
How logical, understandable				
How useful				
What you liked				
What you disliked				
Suggestions for improvement				

STEP 5 Implementation	STEP 6 Measuring Results	WORK-SHEETS	SMOG READA-BILITY TEST	FOCUS GROUP GUIDE	QUESTIONNAIRE FORMAT